

GLEN LAKE FIRE DEPARTMENT

An Equal Opportunity Employer
Applicant Information

Application

Applications are accepted in person or by mail during posted application periods. All applications must be completely filled out and all required forms must be submitted with the application in order to be considered valid.

General Information

- Work as an EMT/Firefighter is shift work. The shifts are 24 hours long and rotate on a three week schedule.
- Work as an EMT/Firefighter involves continual study and training.
- Overtime is paid at the rate of 1 1/2 times the regular salary.
- A new EMT/Firefighter is considered a temporary employee and on probation for the first twelve months of employment.

Pre-Interview Requirements:

- Position applications will be reviewed to assure they are complete and that each applicant has identified they meet the minimum requirements for the position in which they are applying for. Once an application is deemed complete, the applicant will be placed for a pre-interview assessment.
- Pre-interview assessments will be determined by the department and notification given to the applicant. The pre-interview process includes; Criminal background investigation, personal history/professional employment background investigation, written knowledge examination, and physical agility test. The details of these pre-interview requirements are listed below.

Personal History/Background Investigation/Motor Vehicle Records Check

Applicants will be given a Personal History Statement and a packet to be completed, notarized as applicable, and returned to the department. Based upon these documents, each applicant will be subject to a thorough background investigation. Personal and employment references will be contacted. Checks will also be made of the applicant's driving and any criminal records. Persons who successfully pass the background investigation will be scheduled for an interview.

Knowledge Evaluation

This evaluation consists of a 90 question written test designed to establish the applicant's reading comprehension, mechanical aptitude, situational judgment, basic math, spatial sense, logical reasoning, and ability to read maps. There is a two (2) hour time limit to take the test. The test must be passed with a score of 75% or greater.

Physical Agility Test

- The physical agility test is a series of physical performance events designed to test the potential EMT/Firefighter's strengths, endurance and agility in a manner which parallels as closely as possible the physical demands of sustained emergency operations.
- Applicants are required to complete the test under time constraints in order to advance in the application process. Those not successfully completing the Physical Agility Test will be removed from further consideration during the current hiring process.
- Those who do successfully complete the test will be eligible to move forward in the hiring process.

Interviews

- In order to qualify for the interview process, the applicant must successfully complete the pre-interview assessment process. A designated panel will conduct oral questioning of the selected applicants. Based on responses to the questions, the panel will evaluate each applicant.
- An applicant must receive a satisfactory evaluation from the panel in order to continue in the hiring process. Applicants who do not receive a satisfactory evaluation will be removed from further consideration for the current hiring process.

- The applicant will also be ineligible to be re-considered for employment with the Glen Lake Fire Department for a period not less than one year.
- Applicants who satisfactorily complete the interview are eligible to proceed to the next steps in the applicant evaluation process.
- The applicant will complete a pre-assessment questionnaire prior to the oral interview. This will test the writing skills of the applicant.

Eligibility List

- After successfully completing all previous aspects of the hiring process, the applicant will be ranked on an eligibility list.
- This list is developed using a combination of testing scores and interview performance. As positions open in the department, candidates may be offered an opportunity to proceed to the next step in the hiring process.
- Eligibility lists remain in effect for twelve (12) months after they are established.

Conditional Offer of Employment

- Eligible candidates may be given a conditional offer of employment by the Chief of the Department.
- The offer of employment will be conditional on the applicant's ability to successfully pass a medical evaluation and urine drug screen.

Post-Offer Medical Examination and Drug Screen

- Upon being offered a conditional offer of employment, the applicant will be scheduled to take a post-offer medical examination and drug screen.
- The medical examination will be conducted to ensure that the applicant meets the medical requirements set by the fire department using standards established by the National Fire Protection Association. The applicant will be given a drug screen urinalysis to determine the presence of any illegal drugs.
- Applicants who do not meet these requirements will be removed from consideration during the current hiring process.
- The candidate must complete a HIPAA release form and have personal medical records forwarded to the Department's physician.

Offer of Employment

- An applicant who has successfully completed all aspects of the hiring process will be given a final Offer of Employment from the Chief of the Department.

Reasons for Rejection

The following are some areas or activities which may cause an application to be denied:

- The applicant is deemed physically or mentally unfit to perform the duties of a Firefighter.
- The applicant has a recent history of excessive use of alcohol, or use of narcotics or other drugs which may affect job performance.
- The applicant has a history of convictions which relates to fitness to perform the required duties of a Firefighter, or a record of conviction for any crime involving moral turpitude.
- The applicant has a record of unsatisfactory employment.
- The applicant has made false statements of any material fact or has practiced or attempted to practice deception or fraud in the application.
- The applicant has used political pressure or bribery to secure an advantage in employment.

For more information, contact the Human Resources staff at (231) 334-3279 or come by the office located at Glen Arbor Public Safety Building, 6401 W. State St., Glen Arbor, MI, 49636

The Glen Arbor Township is an Equal Opportunity Employer.

GLEN LAKE FIRE DEPARTMENT

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Requirements for Probationary Positions

Prerequisites

The prerequisites for the position of EMT/Firefighter are established by Glen Arbor Township and the Glen Lake Fire Department.

You may submit a resume **along with** a completed application. Do not leave any blanks. Use full names, addresses, zip codes and telephone numbers. An incomplete application may slow down or terminate the application process.

Attach all copies of the specified documents to the application. If the required documents are not attached, the application will not be processed.

A new EMT/Firefighter is considered a temporary employee and on probation for the first twelve months of employment.

All applicants for probationary EMT/Firefighter positions with the Glen Lake Fire Department shall meet the following minimum criteria.

1. Meet all qualifications set forth in the published position description.
2. Must be at least 21 years old at date of hire.
3. Must complete a pre-employment physical at which time you are required to provide the Department's physician a copy of your health history from your primary care physician.
4. Have an employment history which demonstrates stability and reliability. Any applicant who has been involuntarily terminated from employment or who has resigned in lieu of involuntary termination for inefficiency, delinquency or misconduct within (5) years of the date of application will be disqualified. Similarly, any applicant who has a history of unstable work, as demonstrated, for example, by short terms of employment over the applicant's history, will be disqualified.
5. Pass a criminal history check. Applicants that have admitted, pled guilty to, or been found guilty of any felony or theft will be disqualified from the hiring process. Any applicant who has admitted, pled guilty to, or been found guilty of any misdemeanor within five (5) years of the date of the application will also be disqualified.
6. Be truthful in all aspects of the application, examination and interview process for appointment to a probationary EMT/Firefighter position in the fire department. Any applicant who has made a false statement of any material fact, intentionally withheld information, practiced any fraud or deception in his or her application, examination, interview, or appointment shall be disqualified.
7. Cooperate fully in the employment process. Any applicant who has failed to complete or satisfactorily meet the requirements of the employment process, by such acts as missing appointments, failing to return necessary paperwork, failing to notify the Fire Department of current telephone numbers or addresses, failing to cooperate in the background check process, or otherwise failing to complete the employment process shall be disqualified.
8. All applicants must be able to pass various tests designed to evaluate the mental, physical ability and character of the applicant to perform the essential functions of an EMT/Firefighter. Any applicant who is under the care of a physician during the application, examination or interview process must provide a written release from that physician in order to participate in any portion of the employment selection process designed or intended to test the applicant's physical ability to perform the essential functions of an EMT/Firefighter.
9. Comply with all directives and standard operating procedures of the Glen Lake Fire Department which set forth requirements for applicants seeking employment with the department.
10. Commit to the following requirements of employment:
 - Have a Michigan Operators (Class "O") driver's license and complete a Michigan Office of Firefighter Training Emergency Vehicle Driving course within 90 days of employment as an EMT/Firefighter. You must provide a copy of your Driver's License. If an out of State license is provided a Michigan Driver's License must be obtained before the date of hire.

- Successfully complete the department's orientation program within one year of employment.
- Be a State of Michigan certified Firefighter II. Must provide copies of Michigan Firefighter II, Haz-Mat Awareness and Haz-Mat Operations certificates. Pro-Board accredited program certificates may be submitted. If a Pro-Board FFII certificate is submitted the applicant must obtain a Michigan FFII certificate within three (3) months of the date of hire.
- Be a State of Michigan licensed EMT-Basic (or higher) by the date of employment. Must provide a copy of Michigan EMS license. A National Registry EMS certificate may be submitted. If a National Registry EMS certificate is submitted the applicant must obtain a Michigan license prior to date of hire.
- You must provide a copy of either a high school diploma or General Equivalency Diploma.
- Maintain a satisfactory rating on monthly/yearly performance evaluation reports.
- Complete the Waivers and Releases provided in this packet. These must be submitted along with application. It is very important that you read and complete these forms, write clearly and have them notarized.
- Obtain Northwest Regional Medical Control Authority level of function as it pertains to the applicant's licensure level. This must be obtained within three (3) months of employment.
- Establish residency per the negotiated Agreement between Glen Arbor Township and Glen Lake Firefighters Local 5086.

GLEN LAKE FIRE DEPARTMENT
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Application Packet Checklist

Applicant's Name: _____

Current Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Current Mailing Address (if different): _____

City: _____ State: _____ Zip: _____

THIS FORM MUST BE RETURNED WITH THE APPLICATION PACKET

Packets can be returned in person or mailed to:

Glen Lake Fire Department
Attn: Human Resources
6401 W. State Street
P.O. Box 212
Glen Arbor, MI 49636

They must include **ALL** materials listed below in order to be considered complete.

- Completed Glen Lake Fire Department Employment Application
- Copy of high school diploma or acceptable high school equivalency certificate. If G.E.D. must provide copy of certified test score.
- Authorization for Release of Personal Information
- Waiver of Liability and Release for Physical Agility Test
- Notice of Pre-Employment Drug Testing
- Authorization to Collect Background Information
- Copy of valid medical licenses. A copy of National Registry certificate must accompany Out-of State licenses.
- Copy of current Health Care Provider CPR card. Copy of ACLS card for Paramedic positions.
- Copy of valid firefighter and Haz-Mat certifications. Out-of-State certificates must have Pro-Board or IFSAC Seal
- Copy of current valid Driver's License
- Provide, upon request, proof of U.S. citizenship
- Provide, upon request, proof of Selective Services Registration
- If a veteran, include proof of dates of service and discharge status (Form DD-214)
-

PRE- INTERVIEW TEST CHECK LIST

- Bring valid driving license
- Bring full set of turnout gear
- Bring SCBA or SCBA mask
- Notify Glen Lake Fire Department prior to Pre-Interview testing if unable to provide turnout gear or SCBA

Glen Arbor Township Employment Application

An Equal Opportunity Employer

Important Instructions for completing the application:

- Please TYPE or PRINT in INK
- Applications are accepted only for job titles for which recruitment is currently being conducted.
- **All information** requested **must be completed** on the application. Incomplete or illegible applications will not be processed. If information does not apply N/A should be placed in the box.
- This application form and its attachments are official property of the Department and will not be returned, reused or copied for you after being submitted. You should retain a copy of this application for future use or reference.
- Excessive or nonessential attachments will not be referred to the hiring department. Only information necessary to complete the application should be attached. Examples of work, awards, letters, etc., may be taken to interview.
- If more space is needed to give full answers or explanations, attach additional sheets referencing the item number, your name, and job title applied for. Staple attachments to the application.
- Only United States citizens or aliens who are legally entitled to work in the United States are eligible for employment.
- Glen Arbor Township affords equal employment opportunity to all individuals regardless of race, color, national origin, sex, religion, age, qualified disability status or veteran status.
- Reimbursement for travel expenditures during an interview process is not available.
- Please make sure you meet the minimum qualifications and the application deadline. Applications are due no later than 3PM ET on the posted closing date.
- Applications may be delivered Monday through Thursday from 8:00 AM to 4:30 PM in the Administration office or you may mail your application to our office.

Applications can be mailed to:

Glen Lake Fire Department
Human Resources
PO Box 212
Glen Arbor, MI 49636

Contact information:

231-334-3279
231-334-4050 Fax
info@glenlakefire.org
www.glenlakefire.org

1. Official Job Title Applied For As Stated On Announcement		2. Date of Application	
3. Last Name		4. First Name	
		5. Middle Name	
6. Mailing Address		7. City	
		8. State	
		9. Zip Code	
10. Daytime Contact Phone		11. Evening Contact Phone	
		12. Email Address	
13. Driver's License #		State Issuing License	
		Class or Type of License	
14. Can you, upon employment, submit documentation verifying your identity and your legal right to work in the United States?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
15. Check the schedules you are willing to work:			
<input type="checkbox"/> Weekdays <input type="checkbox"/> Weekends/Holidays <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time			
16. Are you presently employed by the Glen Arbor Township? If yes, specify department and current title			
<input type="checkbox"/> Yes <input type="checkbox"/> No		Specify:	
17. If previously employed by the Glen Arbor Township, specify department(s), title(s) and date(s).			

18. If you are under 21 years of age, can you provide proof of your eligibility to work?						
<input type="checkbox"/> Yes <input type="checkbox"/> No						
19. If you are related to any Glen Arbor Township employee, Board member or official, specify names, relationship and department:						
20. Are you able to perform all the essential functions of the job for which you are applying, with or without, reasonable accommodation?						
<input type="checkbox"/> Yes <input type="checkbox"/> No						
21. If you have been employed or attended school under other names, list names and dates of use:						
22. Dates of Military Service			Branch of			
From:		To:				
Section B: Answer all questions. Do not include minor traffic violations (such as parking and speeding tickets)						
23. Have you ever been convicted of a crime (misdemeanor, felony, or military court martial)?						
Yes No						
24. Have you ever been placed on probation?						
Yes No						
25. Have you ever been placed on deferred adjudication?						
Yes No						
26. Are there criminal charges currently pending against you?						
Yes No						
27. For any yes answer to questions 23-27, list type of offense, location and fine or sentence received. Convictions do NOT necessarily disqualify an applicant from employment consideration.						
Section C: Education, Certification, Licenses & Additional Skills						
Do you have a High School Diploma or GED?		Mark highest level				
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> HS/GED <input type="checkbox"/> Some College <input type="checkbox"/> Associate <input type="checkbox"/> Bachelor <input type="checkbox"/> Master <input type="checkbox"/> Doctoral				
College, University or Vocational School Name & City, State		From	To	Major	Degree earned	Sem. Hours
1.						
2.						
3.						
Licenses or Certificates				Date Earned	Expiration Date	
1.						
2.						
3.						
In what language(s) other than English are you proficient? Language						
1.				<input type="checkbox"/> Speak <input type="checkbox"/> Read <input type="checkbox"/> Write		
2.				<input type="checkbox"/> Speak <input type="checkbox"/> Read <input type="checkbox"/> Write		
Additional Skills: List equipment, software, specialized systems or other skills that are related to the job for which you are applying.						

Section D: List jobs in reverse order starting with your most recent job. List your work history for the last 10 years including volunteer, part-time, temporary, self-employment and military jobs. Provide a detailed description of duties performed. Do NOT substitute a resume for completion of this section. You may attach additional pages in the same

Employer	Address	City, State and Zip Code	
Your Job Title	From (Month/Year)	To (Month/Year)	
Last Salary	Hours per Week	Reason for Leaving	
Supervisor's Name	Supervisor Phone #	May we contact this supervisor?	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Duties:			
Employer	Address	City, State and Zip Code	
Your Job Title	From (Month/Year)	To (Month/Year)	
Last Salary	Hours per Week	Reason for Leaving	
Supervisor's Name	Supervisor Phone #	May we contact this supervisor?	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Duties:			
Employer	Address	City, State and Zip Code	
Your Job Title	From (Month/Year)	To (Month/Year)	
Last Salary	Hours per Week	Reason for Leaving	
Supervisor's Name	Supervisor Phone #	May we contact this supervisor?	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Duties:			

Employer	Address	City, State and Zip Code
Your Job Title	From (Month/Year)	To (Month/Year)
Last Salary	Hours per Week	Reason for Leaving
Supervisor's Name	Supervisor Phone #	May we contact this supervisor?
		<input type="checkbox"/> Yes <input type="checkbox"/> No
Duties:		
Professional Reference: Name	Relationship /Occupation	Phone
1 .		
2 .		
3 .		

How did you hear about the position?	
<input type="checkbox"/> Friend/Family	<input type="checkbox"/> Newspaper
<input type="checkbox"/> Internet	<input type="checkbox"/> Radio/TV
<input type="checkbox"/> Fire Department Website	<input type="checkbox"/> Bulletin board
<input type="checkbox"/> Job fair	<input type="checkbox"/> Employee referral
<input type="checkbox"/> Magazine/newsletter	<input type="checkbox"/> Other:

Section E: Complete this section if the job you are applying for requires the operation of a motor vehicle. It is a necessity for the Township to hire only employees who are safe drivers with good driving records. This section will be used to verify driving eligibility.

In the past 5 years, have you had your driver's license revoked or suspended?
<input type="checkbox"/> Yes <input type="checkbox"/> No
In the past 5 years, have you had an application for driver's license denied?
<input type="checkbox"/> Yes <input type="checkbox"/> No
In the past 5 years, have you been convicted of reckless driving?
<input type="checkbox"/> Yes <input type="checkbox"/> No
In the past 3 years, have you been convicted of more than 2 moving violations?
<input type="checkbox"/> Yes <input type="checkbox"/> No
In the past 3 years, have you been determined to be at fault in a vehicle accident
<input type="checkbox"/> Yes <input type="checkbox"/> No

Drug Free Work Environment: Glen Arbor Township and Glen Lake Fire Department is committed to providing a safe, efficient, drug-free work environment for all employees. In keeping with this commitment, finalists for all job openings will be required to provide body fluids (blood or urine) to determine the use of alcohol, illegal or controlled substances. Failure of the drug alcohol screen will result in denial of employment. Additional information on this program may be obtained from the Glen Lake Fire Department Manual Operations and Administration.

Falsification of Information: I hereby certify that all statements made on this application and attachments are true and correct to the best of my knowledge and belief. I understand that any false statement, misrepresentation or omission made by me on this application or subsequent interview(s) could cause me to be ineligible for employment or terminated from employment. Further I understand that I am required to abide by all rules and regulations of Glen Arbor Township.

Verification of Information: I authorize Glen Arbor Township and its agents to investigate and verify the facts claimed by me on this application. I further authorize my former employers to provide any information requested by Glen Arbor Township. I understand that employment processing may include a criminal background check, drug screening and/or review of the driving record. I hereby release Glen Arbor Township and its agents from all liability in making any investigation and inquiry relative to information contained in the application form.

I understand that nothing in this application or in any prior or subsequent written or oral statement creates a contract of employment or any rights in the nature of a contract. I agree to submit to medical examination and drug screening, if required.

Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States. The Department will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

I have read and agree to the above statements

Signature:

Date:

GLEN LAKE FIRE DEPARTMENT
An Equal Opportunity Employer
Authorization for Release of Personal Information

I hereby authorize a review, full disclosure and release of all records, including but not limited to photocopies of records concerning myself to any duly authorized agent of the Glen Lake Fire Department, whether the said records are of public, private, or confidential nature.

The intent of this authorization is to give my consent for a full and complete disclosure and release of the records of: **educational institutions, financial or credit institutions, including records of loans, the records of commercial or retail credit agencies (including credit reports and/or ratings), and other financial statements and records whenever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veterans Administration; employment and pre-employment records, including background reports, efficiency ratings, attendance records, complaints or grievances filed by or against me or another person in any case, either criminal or civil,** in which I presently have or have had an interest.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the Glen Lake Fire Department. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any liability which may be incurred as a result of furnishing such information.

I further agree to waive any right whatsoever to the background investigation report or personality profile report developed through this waiver.

A photocopy of this release form will be valid as an original thereof, even though the said copy does not contain an original writing of my signature.

Applicant's Date of Birth

Driver's License Number

Applicant's Address

Applicant's signature

THE STATE OF _____

COUNTY OF _____

BEFORE ME, the undersigned authority, a Notary Public in and for the State of _____, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he/she execute the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this the _____ day of _____, 20__ A.D.

Notary Signature

Notary Public In and For the State of _____

My Commission Expires: _____

GLEN LAKE FIRE DEPARTMENT
An Equal Opportunity Employer
Waiver of Liability and Release for Physical Agility Test for Firefighters

WHEREAS, the undersigned is making application for employment with the Glen Lake Fire Department, and in connection with such application it is necessary that the applicant pass a physical agility test as administered by the Fire Department, and

WHEREAS, the applicant desires to release the Glen Lake Fire Department and Glen Arbor Township from any liability for injuries which may occur to the applicant during the taking of such test, now therefore

KNOW ALL MEN BY THESE PRESENTS:

That the undersigned, for and in consideration of the benefits to be received by the taking of a physical agility test in connection with an application for employment by the Glen Arbor Township, does by this instrument covenant and agree with the said Glen Lake Fire Department, Glen Arbor Township and any property owner therein to forever refrain from instituting, pressing, or in any way aiding any claim, demand, action or causes of action, for damages, costs, loss of service, expense or compensation for, or on account of, or in any way growing out of, or hereafter to grow out of any injuries which I may sustain in the taking of a physical agility test for consideration of possible employment by the Glen Lake Fire Department, and for the above consideration I hereby agree to hold the said Glen Lake Fire Department and any and all of its agents, employees, officers, and assignees, and any property owner harmless from any damages to myself resulting from or the result of the taking of said test.

The undersigned does hereby acknowledge that this covenant and agreement is voluntarily entered into and does hereby release the Glen Lake Fire Department and any and all of its agents, employees, officers, and assignees, and any property owner from any and all claims for injuries, if any, which I may sustain in the taking of a physical agility test for consideration of possible employment by the Glen Lake Fire Department.

EXECUTED this the _____ day of _____, 20____

Applicant's Signature

THE STATE OF _____

COUNTY OF _____

BEFORE ME, the undersigned authority, a Notary Public in and for the State of _____, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he/she has read and fully understands said release of liability and that he/she has executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this the _____ day of _____, 20__ A.D.

Notary Signature

Notary Public In and For the State of _____

My Commission Expires: _____

GLEN LAKE FIRE DEPARTMENT
An Equal Opportunity Employer
Notice of Pre-Employment Drug Testing

Any individual applying for employment with Glen Arbor Township (the "Township") may be required to submit to a urinalysis drug test as a mandatory part of the application process. This notice serves as a written statement of the Township's intention to conduct such testing as part of the application process. The testing will be conducted by a certified laboratory/testing service selected by the Township, or its agents, in accordance with the procedures required by applicable state and federal regulations.

Tested applicants will be notified any positive test result. All test results shall be considered confidential by the Township and shall not be disclosed to the employees of the Township, or any other person, other than to those persons for whom such disclosure is necessary.

Positive test results or a refusal to sign this consent form and participate in pre-employment drug testing shall be grounds for denial of employment. Arrangements for testing will be made by a representative of the Township, in consultation with each applicant. Cooperation in scheduling the testing is important for processing an application.

By signing below, you consent to be drug tested and acknowledge you have thoroughly read the foregoing notice and policy, and you understand and agree that in order to be considered for employment with the Glen Lake Fire Department, you will comply in full with the Township and its Fire Department's drug testing policy

EXECUTED this the _____ day of _____, 20_____

Applicant's Signature

THE STATE OF _____

COUNTY OF _____

BEFORE ME, the undersigned authority, a Notary Public in and for the State of _____, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he/she has read and fully understands said release of liability and that he/she has executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this the _____ day of _____, 20__ A.D.

Notary Signature

Notary Public In and For the State of _____

My Commission Expires: _____

GLEN LAKE FIRE DEPARTMENT
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Authorization to Collect Background Information

I have applied for employment with Glen Arbor Township. I authorize investigation of all **statements contained in this application** for employment as may be necessary in arriving at a decision. I further authorize representatives of the Township to obtain pertinent information from my **previous employers, references, and other persons with knowledge of my work history and background, education, regulatory or police records, driving records, licensing status or professional designation, and character or reputation**, and to consider the information provided by the background check when making decisions regarding my employment as an EMT/firefighter with Glen Lake Fire Department in Glen Arbor Township, Michigan.

I authorize all previous employers, references or other persons having knowledge of my record or myself to release such information to the Township, and hereby release all persons from liability for any damage that may result from furnishing such information to the Township or its Fire Department.

A photocopy of this release form will be valid as an original thereof, even though the said copy does not contain an original writing of my signature.

EXECUTED this the _____ day of _____ 20_____

Applicant's Date of Birth

Driver's License number

Applicant's Address

Applicant's signature

THE STATE OF _____

COUNTY OF _____

BEFORE ME, the undersigned authority, a Notary Public in and for the State of _____, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he/she has read and fully understands said release of liability and that he/she has executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this the _____ day of _____, 20__ A.D.

Notary Signature

Notary Public In and For the State of _____

My Commission Expires: _____