

**Ashland Fire Department - IAFF Local 875**

***Application for Employment: Addendum 1***

Please submit this addendum with your City of Ashland application failure to do so will result in delayed process of your application and potential removal from the candidate list. Please send inquiries and completed applications to [jobs@coawi.org](mailto:jobs@coawi.org)

**Fire Related Coursework**

Please list all current certifications and licenses you hold. These certifications are state and national certifications, not technical college course completion certificates. Copies of your certification/ licenses are recommended to be attached to the application. If you do not attach copies of certificates/licenses you may be asked to provide hard copies at a later date.

**Coursework and Related Certifications**

Please list any related course you have completed (Include: Computer Skills, Foreign Languages, Trench Rescue, High Angle Rescue, Confined Space, and/or any other relevant courses:

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**Fire Certifications**

<b>Issuing State of Certification</b>	<b>Certification Title</b>	<b>Certification Date</b>	<b>Certification Number (if applicable)</b>

**EMS Certifications**

<b>Issuing State of Cert.</b>	<b>Certification Title</b>	<b>Certification Date</b>	<b>Nat'l Registry # (if applicable)</b>	<b>License Number (if applicable)</b>

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Other Certifications

Issuing State of Certification	Certification Title	Certification Date	Certification Number (if applicable)

**Pending Fire Related Certifications**

Please list all pending certifications and licenses you hold. These certifications are state and national certifications, not technical college course completion certificates. Copies of your certification/ licenses are recommended to be attached to the application. If you do not attach copies of certificates/licenses you may be asked to provide hard copies at a later date:

Pending Fire Certifications

Issuing State of Certification	Certification Title	Certification Date	Certification Number (if applicable)

Pending EMS Certifications

Issuing State of Cert.	Certification Title	Certification Date	Nat'l Registry # (if applicable)	License Number (if applicable)

Other Pending Certifications

Issuing State of Certification	Certification Title	Certification Date	Certification Number (if applicable)

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Additional Questions:

Please list any organizations to which you belong or have belonged as well as any honors or awards you have received relevant to the position for which you are applying:

**License Statement**

Has a State Licensing Authority ever revoked, suspended, or placed conditions on your professional/occupations license(s)? \_\_\_\_\_

Signature:

By signing below I am certifying the above information is factual to the best of my knowledge, I also understand this application in its entirety contains no promise of work. Additionally, if I am selected for the position I understand there are other certifications and commitments I will be required to make to be officially hired for the position. These include but are not limited to the following:

- Background Check Release and Authorization
- No tobacco Use Condition of Employment
- Acknowledgement and Waiver of the CPAT Orientation and/or Conditioning period and/or timed practice runs

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Candidate Printed Name Date

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Candidate Signature

*The City of Ashland does not discriminate on the basis of race, color, national origin, sex, gender identity, sexual orientation, religion, age, marital status, family/parental status, political beliefs, or disability in employment or provision of services, programs or activities.*