



# Virginia Beach Fire Department



## Volunteer Support Technician Application

### Personal Information

Last Name:	First Name:	Middle Name:	Email Address:
Address:	City:	State:	Zip code:
Home Phone:	Work Phone:	Cell/Other Phone:	Are you legally eligible for employment in the United States? ____yes ____no
Have you ever been employed by the City of Virginia Beach? ____yes ____no	If yes, please list the department and dates of your employment:		
Is any member of your family currently employed with the City of Virginia Beach? ____yes ____no	If yes, give name, relationship, department, and position:		

### Education

Circle Highest Level Completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED College: 1 2 3 4 Graduate School: 1 2

Name of College/University:	Dates Attended	Hours Completed	Type of Hours:	Degree Earned:

## Work Experience

Employer Name:	Job Title:	Dates Employed:	Type of Employment: (PT/FF/Vol)	Hours Per Week:
Supervisor Name:	Supervisor Phone Number:	Supervisor Email Address:		
Reason for Leaving:				
Job Duties (Be Specific):				

Employer Name:	Job Title:	Dates Employed:	Type of Employment: (PT/FF/Vol)	Hours Per Week:
Supervisor Name:	Supervisor Phone Number:	Supervisor Email Address:		
Reason for Leaving:				
Job Duties (Be Specific):				

Employer Name:	Job Title:	Dates Employed:	Type of Employment: (PT/FF/Vol)	Hours Per Week:
Supervisor Name:	Supervisor Phone Number:	Supervisor Email Address:		
Reason for Leaving:				
Job Duties (Be Specific):				

### Additional Information

Do you have a Driver's License? ____yes ____no	Type of Driver's License: ____Standard Operator ____Commercial (CDL)	State:	Expiration:
List and provide official documentation of other job-related Licenses/Certifications you have, including State and Expiration:			
Indicate Computer Skills: ____Word Processing (WordPerfect, MS Word, Works)      ____Email (GroupWise, Outlook) ____Spreadsheet (Quattro Pro, Excel)      ____Other (PowerPoint, Presentation, Publisher) ____Database (Access, FoxPro)			
Are you eligible to claim Veteran's Preference? ____yes ____no			

### Supplemental Questions

Please help us in our recruiting efforts by letting us know how you found out about this position.
If a city employee referred you to this position, please provide his/her name and department. (If you were not referred by an employee, enter NA):

### Special Instructions to the Applicant

Interested applicants MUST attend <b>one</b> VST Information Meeting AND the Physical Assessment. You will be contacted by Fire Human Resources to confirm your appointment.
NOTE: Incomplete documentation <b>may</b> result in the removal of your application from the current review process.

## Agreement

### STATEMENT OF CERTIFICATION AND BACKGROUND CHECK AUTHORIZATION

The information supplied by me in the application/selection process is complete and true to the best of my knowledge and belief. I understand that any misstatement, misrepresentation or omission of material facts may cause my forfeiture of any and all rights to employment in the municipal service of the City of Virginia Beach.

I recognize the need of the City of Virginia Beach to examine and verify information pertaining to my qualifications for employment/volunteering and hereby freely consent to allowing the City to verify such information. I further authorize the release of such information to the City for application/selection process verification purposes and waive my rights under the Privacy Act or other legal limitations pertaining thereto.

I hereby acknowledge and understand that the City of Virginia Beach has the authority, in accordance with the 1985 Amendments to the Fair Labor Standards Act, to award compensatory time at the time of one-half rate in lieu of overtime pay for all overtime worked by all employees who are non-exempt under the City's Overtime Policy.

I understand that if employment is offered by the City of Virginia Beach, such employment shall be conditional upon, but not limited to, State Police verification of my criminal history, Federal Bureau of Investigations (FBI) verification of my criminal history, and where applicable, Department of Motor Vehicles (DMV) verification of my driving record and Department of Social Services child abuse/neglect checks. Further, if I am hired and subsequent information discloses child abuse or neglect information, a criminal history and/or DMV record that is deemed unsatisfactory, I understand that the City has the right to immediately terminate me. \*The aforementioned employment is also conditional upon successfully completion of a probationary period and with the understanding that the City of Virginia Beach will not be committed to retain me for any specific term of employment. Some positions may require a medical and/or psychological evaluation as a condition of employment. In accordance with the City of Virginia Beach Substance Abuse Policy, such medical evaluation may include a drug screening.

The following information pertains to positions in departments which participate in federal reimbursement programs and the Office of the Inspector General (OIG) Hiring Exclusions: I understand that if I am excluded from participation in federal reimbursement programs (including, but not limited to, Medicaid, Medicare, and Champus) by the Office of the Inspector General, then I do not meet the requirements and am not eligible for further consideration for this position.

I certify that I have read the above statements or have had them read to me and that I understand them.

BY SIGNING BELOW, I certify that I have read and agree with these statements.

---

Applicant's Name (print)

---

Applicant's Signature

---

Date