



VENTURA COUNTY FIRE DEPARTMENT

FIRE EXPLORER APPLICATION

Thank you for your interest in the VCFD Fire Explorer Program. Please download, complete, and email the application to VCFD.Explorers@ventura.org. Applications must be submitted no later than October 7, 2022. Our team will review the applications and will contact candidates in the next couple of weeks with additional information.

If you have any questions or are unable to download the application, please contact VCFD.Explorers@ventura.org.



Fire Explorer Application

Explorer applications must be properly completed in order for further consideration. Information not included on the application will not be considered.

Position Applied for: *Fire Explorer*

Last Name

First Name

M.I.

Home Phone

Cell Phone

Address (include apt no.)

City

State

Zip Code

E-mail Address

Date of Birth

Education and Training

Middle School Name

Address

Did you graduate Middle School? If yes, check the box

High School Name

Address

Did you graduate High School? If yes, check the box

College/University Name

Address

Did you graduate College? If yes, check the box

Licenses or Certificates:

Other: Special training or skills related to position:

Personal Information

Check for Yes

Are you under 18 years of age?

Do you currently possess a valid CA Driver's License?

Experience

Note: If you have more than two (2) records of employment, you may share the additional employer information during the interview.

Dates of Employment

| | | |
|------|----------------------|----------------------|
| From | <input type="text"/> | <input type="text"/> |
| To | <input type="text"/> | <input type="text"/> |

Name of Employer

Address

City

State

Hours Per Week

Title of Your Position

Supervisor's Name

Phone No.

Reason For Leaving:

Type Work Performed of (Be Specific):

Dates of Employment

| | | |
|------|----------------------|----------------------|
| From | <input type="text"/> | <input type="text"/> |
| To | <input type="text"/> | <input type="text"/> |

Name of Employer

Address

City

State

Hours Per Week

Title of Your Position

Supervisor's Name

Phone No.

Reason For Leaving:

Type Work Performed of (Be Specific):

References

Give the names and addresses of three people, not relatives, with whom you have known at least one year. You may use past employers.

**Name
Address
Phone No.**

Reference Name #1

Address

Phone No.

Reference Name #2

Address

Phone No.

Reference Name #3

Address

Phone No.

Other

Use this space for additional information about your qualifications:

By submitting this application, I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the department from all liability for any damage that may result from utilization of such information.

Note: Selected candidates will be required to participate in the County of Ventura background check to advance in the process. In addition, candidates with a driver's license will be required to participate in a VCFD DMV record check.