CITY OF
MARION FIRE DEPARTMENT
FIRE CHIEF TIM BARNETT
204 NORTH COURT ST
MARION, IL 62959
Phone: 618-997-5730
fax: 618-997-5762
www.marionfire.us

APPLICATION PACKET OUTLINE

1. Letter From the Fire Chief
2. Department Overview
3. Qualifications
4. Outline of Position
5. Notice of Important Dates
6. Testing and Hiring Process
7. Physical Fitness Assessment
8. Check List
9. Application Fee
10. Certificate of Good Moral Character (Three Required)
11. Credit Report Authorization
12. Background Waiver
13. Rules and Regulations Agreement
14. Pre-Employment Contract
15. Medical Examiner's Certificate (Completed by your physician)
16. Physical Fitness Assessment Release
17. Application (Three pages)

Note:
Required items must be completed and returned by
August 12, 2025 (no later than 5:00 PM)

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LETTER FROM THE FIRE CHIEF

Dear Applicant,

Congratulations for making the decision to apply and test for the position of Firefighter for the City of Marion, Illinois Fire Department. By completing and submitting all the necessary forms contained within this application packet, you are taking the first step toward becoming a member of the City of Marion Fire Department. To reach the goal of becoming a firefighter, you must successfully complete a number of steps. All the information you need to complete those steps is contained within this application packet.

Our Mission Statement:
The Mission of the Marion Fire Department is to protect our community and provide a first-class service to our customers.

We are seeking committed individuals to assist us in fulfilling our mission statement. On behalf of the City of Marion, I extend my best wishes to you as you begin this endeavor. Your hard work and perseverance will be richly rewarded should you be selected to serve the public as a member of the City of Marion Fire Department.

Thank You,

Tim Barnett
Fire Chief
City of Marion Fire Department

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DEPARTMENT OVERVIEW

Currently, The City of Marion Fire Department is an all career fire department providing a full range of services including fire prevention, fire suppression, technical rescue response, hazardous materials response, First Responder response, building inspections, and more. The department currently operates with four shifts from one station. The 29 personnel are comprised of the following:

- 1 Fire Chief
- 1 Assistant Fire Chief
- 3 Captains
- 4 Lieutenants
- 20 Firefighters

The department averages over 950 calls per year. These include structure fires, vehicle fires, brush fires, vehicle crashes, rescues, hazardous materials, alarms, and more. In the last five years, we have responded to an average of 50 working structure fires, per year. The station is staffed at all times. There is a minimum staff level of four personnel while on-duty, although seven personnel are assigned to each shift. Work schedules include weekdays, weekends, holidays, and extended hours in emergencies, disasters, or other situations influenced by workload or staffing difficulties.

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QUALIFICATIONS

The following qualifications are in compliance with Illinois Compiled Statutes Chapter 65-5, Article 10, Division 2.1.

- Must have high school diploma or GED
- Age requirement: minimum – 21 years old, maximum – 35 years old
- Must be of good health and good eyesight
- Must be a citizen of the United States
- No previous conviction of any felony
- No previous conviction of disqualifying misdemeanor
- No previous Court-Martial (if prior military service)
- Valid Driver's License

No previous experience or training is necessary or required by the Marion Fire Department to qualify for employment as a Firefighter. The City of Marion is an Equal Opportunity Employer.

The profession of a Firefighter requires one to be in good physical condition. A Firefighter must undergo great physical demands in a temporary or sustained emergency operation. Certain jobs may require lifting heavy objects such as equipment or people, raising ladders, pulling charged hose lines, carrying tools, working in adverse weather conditions, and entering hostile enclosed environments, all while wearing fully covered personal protective equipment.

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OUTLINE OF FIREFIGHTER POSITION

Please read the items carefully so there will be no misunderstanding of what the chosen applicant can expect and what will be expected of that applicant. Please note that the following information provided is based on the current labor agreement between the City of Marion and the Marion Professional Firefighters Union Local 2977. Any and all items may be subject to change when new agreements are met.

Residency: Firefighters are required to live within 10 miles of the City of Marion, or within the corporate city limits of the City of Marion. There is an 18-month period to achieve this from the date of hire.

Shifts: Firefighters work 24-hour shifts, with 72 hours off between shifts.

Salary: Probationary Firefighter's base hourly rate starts at $27.00 - $32.00 per hour.

Sick Days: One sick day (or one 24-hour shift) is awarded every two months. Probationary firefighters will earn their first sick day at the beginning of the odd month after completing a minimum of two months.

Holidays: Six Holidays are awarded at the beginning of the calendar year. Based upon the hire date, the number of awarded days may be pro-rated. If hired on:
Jan 1 – Mar 31 = Awarded six Holidays
Apr 1 – Jun 30 = Awarded four Holidays
Jul 1 – Aug 31 = Awarded three Holidays
Sept 1 – Dec 31 = Awarded two Holidays

Vacation Days: After one year of service, you will earn four vacation days. Additional days are awarded based upon longevity.

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NOTICE OF IMPORTANT DATES

Application Packets & $25.00 fee for
Firefighter must be returned or postmarked to:
The City of Marion Fire Department
204 N. Court Street
Marion, IL 62959
on, or before:
Tuesday, August 12, 2025 (no later than 5:00 P.M.)

The Physical Fitness Assessment will be:
Saturday, August 16, 2025 at 8:00 A.M.
Location:
Marion Fire Department
204 N Court Street
Marion, IL 62959

Note:
Please reference the Physical Fitness Assessment page for required wearing apparel.

The Written Exam will be:
Saturday, August 16, 2025 at 11:00 A.M.
Location:
Marion Fire Department
204 N Court Street
Marion, IL 62959

Note:
Only those candidates that successfully complete the Physical Fitness Assessment will be allowed to take the Written Exam.

THE CITY OF MARION IS AN EQUAL OPPORTUNITY EMPLOYER

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TESTING AND HIRING PROCESS

The Fire and Police Merit Board of the City of Marion is compiling a current Eligibility Roster for the position of Probationary Firefighter, from which future hires may be made. Successful completion in every stage of testing does not, nor represent, a guarantee of employment; only to provide you with the eligibility to be hired should an opening or need arise. Only those candidates that successfully complete every stage will be placed upon the Eligibility Roster.

The testing process is governed by the provisions of 65 ILCS 5/10-2. Certain provisions within the statute allow for the appointed Merit Board to create or modify the testing. Any information in regards to the exact process is detailed within the Application Packet.

The following provides the order of stages for the testing process. Please note that successful completion of each stage must be obtained before proceeding to the next.

1) Application Packet
2) Physical Fitness Assessment
3) Written Examination
4) Interview
5) Second Interview (If deemed necessary)

Upon successful completion of the process, you will be placed on the Eligibility Roster for a period of two years. You may not test for the department again within that two year period. If you do not successfully complete the process, you may apply again at the next scheduled testing and hiring process.

Should you be selected for employment with the Marion Fire Department, a conditional offer of employment will be made until the following are completed and passed:

1) Background Check
2) Medical Physical Examination, including pre-employment drug testing

Upon satisfactory results, an official offer of employment will be given. When accepted, you will be provided with the first date of employment.

As a condition of employment; prior to obtaining one year of service, any required training deemed necessary by Illinois State Statute or Labor Agreements must be completed.
This includes, but is not limited to:

1) Certification of Basic Firefighter
2) If not a previous graduate of; attend and successfully complete the 370 hour Basic Firefighter/NFPA Firefighter I Academy at Illinois Fire Service Institute located at Champaign, Illinois.

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PHYSICAL FITNESS ASSESSMENT

The Physical Fitness Assessment (PFA) is designed to evaluate the basic physical condition of the applicant in endurance, strength, flexibility, agility, and for fear of heights, darkness, and enclosed spaces. All components of the PFA must be passed successfully. Because the requirements set are minimum standards, failure to pass any component would indicate that the applicant is physically unfit for duty as an active member of the department. At such time, the application process will be terminated for that applicant and the applicant will become ineligible for any further participation in the testing process. Examiner evaluation is final and not subject to appeal.

Candidate Physical Ability Test (CPAT) Certification:
Those candidates that possess (and provide with their application) the CPAT **WITH** Ladder Certification (dated within twelve months of the scheduled PFA) shall be exempt from the PFA. Candidates with this certification will not be allowed to participate in any event of the PFA. Those candidates that possess (and provide with their application) the CPAT **WITHOUT** Ladder Certification (dated within twelve months of the scheduled PFA) shall be exempt from the PFA with the exception of the Ladder Climb. Candidates with this certification will only be allowed to participate in the Ladder Climb. Failure to complete this component shall result in the applicant to become ineligible for any further participation in the testing process.

Required Wearing Apparel:

Time Distance Run:	Report to Physical Test:
Running Shoes	Boots with Ankle Protection
T-Shirt or Sweat Shirt	Long Sleeve T-Shirt or Sweat Shirt
Shorts or Sweat Pants	Blue Jeans or Equivalent

1. **Time Distance Run** – Purpose: The purpose of this test is to measure the condition of the lungs, heart, and vascular system aerobic capacity, and is the best-known index to a person's overall physical fitness. Procedure: The applicant will run on a designated course. Walking and/or stopping shall not result in failure of the procedure.

   Minimum Standard – 1/2 mile run
   Minimum Standard – 4 minutes

2. **Hose Drag** – Purpose: To simulate dragging a hose-line from a fire apparatus and pulling a hose-line around obstacles in a stationary position. It will measure overall strength and endurance. Procedure: The applicant, provided with a nozzle attached to 200 feet of 1-3/4" hose, will place the nozzle over their shoulder (not to exceed the marked point of 6 feet). At the signal, "Go" the applicant will drag the hose 75 feet at the location of an obstacle. The applicant will pass the obstacle and turn 90 degrees and continue another 25 feet to the marked stopping point. The applicant will drop to one knee within the marked stopping point and drag the hose until the marked point of 50 feet has been reached with their hand (at which, time will conclude).

   Minimum Standard – 40 seconds

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3. **Equipment Carry** – Purpose: Simulates tool removal and carrying to the scene. It will measure upper and lower body strength, as well as aerobic capacity. It provides indicators of neuromuscular efficiency, which are important in daily activities in firefighting. Procedure: At the signal, "Go" the candidate will remove two designated extrication tools from a table and place them on the ground. The candidate will then pick-up the tools from the ground (one in each hand), carry and walk 75 feet towards and around an obstacle, back to the starting point. Time ends when crossing the starting line. The candidate will then place each tool, one at a time, back on the table.

   Minimum Standard – 40 seconds

4. **Carry and Balance** – Purpose: The test is designed to measure how well the joint and muscle sensors react in order to control movement and maintain balance. Procedure: The candidate will lift and carry a 14-foot ladder using a prescribed ladder carry. The candidate will take the ladder to a building and raise the ladder in a prescribed manner. The ladder tip shall extend to a point marked on the building. The candidate will then climb to the top of the ladder and back down. The candidate will then place the ladder back in its original starting position.

   Minimum Standard – Event Completion

5. **Forcible Entry** – Purpose: Simulates the use of forcible entry as needed at the scene of an incident. Designed to test endurance and overall physical capacity. Procedure: The candidate, provided with a sledgehammer of nine pounds, will face away from a designated object. At the signal, "Go" the candidate will raise the sledgehammer in front of them and force the tool in a downward direction towards the area in between and below their feet to strike the designated object. The designated object shall be moved until it has reached the end of the prop. The candidate shall then turn around and repeat the process until the designated object reaches its original starting position. It will be necessary for the candidate to reposition and make multiple strikes on the object in order to complete the event.

   Minimum Standard – 90 seconds

6. **Manikin Drag** – Purpose: To measure the overall strength of the applicant. Procedure: The applicant will be presented with a training manikin weighing approximately 200 pounds. The manikin will be lying on the ground at the start point. From a position behind the manikin, the applicant shall lift the manikin's torso to the applicant's chest, with the arms placed around the manikin's torso. The applicant shall drag the manikin allowing the feet to remain on the ground to the finish point. Dropping of the manikin or stopping shall not result in failure of the procedure.

   Minimum Standard – 75 feet drag
   Minimum Standard Time – 45 seconds

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7. **Push-Ups** – Purpose: Push-ups will simulate the applicant's strength to push as may be required in the use of pike poles, etc. Procedure: The applicant shall lie flat on the ground, face down, with hands (palm side down) on the ground, under the shoulders. Feet shall be placed together. At the signal, "Go," the applicant will then raise the body by extending the arms until they are straight, then lowering the body fully to the ground. The candidate will then raise their hands from the ground to signal the completion of 1 push-up. The back and legs must remain straight throughout the procedure. The examiner will count out-loud at the raising of the hands from the ground until the minimum standard is met. Should the applicant perform an unsatisfactory repetition, the examiner will not continue counting until the next satisfactory repetition is performed. Should this occur, the examiner will advise the applicant as to why the previous attempt was not considered a satisfactory repetition. Stopping at any point shall not result in failure of the procedure.

Minimum Standard – 25 Push-ups
Minimum Standard Time – 60 seconds

8. **Chin Ups** – Purpose: The purpose of this test is to determine the upper body and arm muscular strength needed for climbing rope, navigating ladder bridges, and doing hoisting operations. Procedure: Candidates will start by grasping a bar with the palms facing towards them at shoulder width. The arms shall be straightened in a fully extended position with the torso in line with the upper arms. At the signal, "Go," the candidate shall raise the body until their chin clears above the bar. The candidate then lowers the body to the starting position as previously described. The candidate shall maintain their grip on the bar without touching the ground. The examiner will count out-loud at the raised portion of each successful repetition until the minimum standard is met. Should the candidate perform an unsatisfactory repetition, the examiner will not continue counting until the next satisfactory repetition is performed.

Minimum Standard – 3 Chin Ups

9. **Sit-Ups** – Purpose: The purpose of this test is to determine the abdominal and back muscular strength needed to lift stretchers, pulling hose, lifting ladders, and holding hose lines. Procedure: The applicant lies flat on the back with their toes placed against a wall, legs bent. At the signal, "Go," the applicant will then curl up to a sitting position, (achieved when the hands touch a marked point of 36" from the ground located on the wall in front of them). The applicant then returns to the position when both hands touch the ground behind their head after each curl. The examiner will count out-loud at the raised portion of each successful repetition until the minimum standard is met. Should the applicant perform an unsatisfactory repetition, the examiner will not continue counting until the next satisfactory repetition is performed. Should this occur, the examiner will advise the applicant as to why the previous attempt was not considered a satisfactory repetition. Stopping at either the lying or curled position shall not result in failure of the procedure.

Minimum Standard – 30 Sit-ups
Minimum Standard Time – 60 seconds

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10. **Ladder Climb** – Purpose: To measure the applicant's aerobic capacity and leg strength as necessary to climb while also testing the fear of heights. Procedure: The applicant, provided with a Class 3 safety harness connected to a manned rope belay system, shall mount an aerial apparatus and be placed at the starting point at the base of the aerial ladder. At the signal, "Go" the applicant will safely ascend the aerial ladder, maintaining at least three points of contact at all times. The applicant must grab the top rung of the ladder. At that time, the Examiner will ask the applicant a series of questions for which the applicant must answer correctly. When advised to do so, the applicant will then safely descend the ladder, maintaining at least three points of contact at all times. There will be no time limits placed upon this procedure yet pausing for a period any longer than ten seconds or being unable to complete the test shall result in failure of the procedure.

Minimum Standard – 75 feet at a 65 degree angle

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CHECK LIST

This form shall be used by the applicant to determine eligibility to proceed to the Physical Fitness Assessment. The City of Marion Fire and Police Merit Board, or its designee(s) will audit the individual's application to confirm the eligibility to proceed to the Physical Fitness Assessment. **All items listed below are required.** Please provide copies only unless stated otherwise. No items will be returned to you. Incomplete applications shall be rejected and disqualify the applicant immediately.

The individual will be notified in the event the application is found to be deficient upon the review of the City of Marion Fire and Police Merit Board, or its designee(s). Please provide the best contact information below.

Telephone Number: _____ **Time of Day:** _____

Email Address: _____

Completed by Applicant		Required Form	Completed By Dept. Personnel	
Included	Not Included		Included	Not Included
☐	☐	No. 8 – Check List	☐	☐
☐	☐	No. 9 – Application Fee Form + $25.00	☐	☐
☐	☐	No. 10 – Certificate of Good Moral Character (x3)	☐	☐
☐	☐	No. 11 – Credit Report Authorization	☐	☐
☐	☐	No. 12 – Background Waiver	☐	☐
☐	☐	No. 13 - Agreement	☐	☐
☐	☐	No. 14 – Pre-Employment Contract	☐	☐
☐	☐	No. 15 – Original Medical Examiner's Certificate	☐	☐
☐	☐	No. 16 – PFA Release of All Liabilities	☐	☐
☐	☐	No. 17 – Application	☐	☐
☐	☐	Copy of Driver's License	☐	☐
☐	☐	Copy of County or State Issued Birth Certificate	☐	☐
☐	☐	Copy of High School Diploma, Certified Transcripts, or Certified GED Certificate	☐	☐
Optional Items				
☐	☐	Previous Firefighting Experience / Certificates	☐	☐
☐	☐	Candidate Physical Ability Test (CPAT) Certificate	☐	☐
☐	☐	Copy of College Transcripts or Diploma	☐	☐

_____
Applicant Printed Name

_____
(MFD Personnel) Reviewer Printed Name

_____
Applicant Signature

_____
(MFD Personnel) Reviewer Signature

J. Barwick
Fire Commissioner

M. Absher
Mayor

T. Barnett
Fire Chief

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APPLICATION FEE

Amount: $25 Non-Refundable

FORM OF PAYMENT
(PLEASE DO NOT SEND CASH)

____Check ____ Money Order
(Make check or money order payable to the City of Marion)
Please attach payment to top of page

PLEASE PRINT

Today's Date: _____

Last Name: _____ First Name: _____

Address:

_____

_____

Contact Phone Number: _____

Signature: _____

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CERTIFICATE OF GOOD MORAL CHARACTER

To: Board of City of Marion Police and Fire Commissioners

I, _____, of _____
(Printed Name) (Complete Address)

_____, do certify that I do not hold any elected or appointed position in
(Telephone Number)
municipal, county, or state government, nor in any branch of the United States Government.

I have known Mr./Mrs. _____ for the past three (3) years and he/she is a person of good moral character, of correct and orderly deportment, of temperate, industrious habits, and in my opinion, is qualified in all respects of the position of Firefighter.

Additional Comments:

_____

_____

_____

_____

_____

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_____

_____.

I ___ am ___ am not related to the applicant.

I further certify that I am willing that this Certificate of Good Moral Character be made public.

_____ _____
(Printed Name) (Signature)

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CERTIFICATE OF GOOD MORAL CHARACTER

To: Board of City of Marion Police and Fire Commissioners

I, _____, of _____
(Printed Name) (Complete Address)

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I have known Mr./Mrs. _____ for the past three (3) years and he/she is a person of good moral character, of correct and orderly deportment, of temperate, industrious habits, and in my opinion, is qualified in all respects of the position of Firefighter.

Additional Comments:

_____

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I ___ am ___ am not related to the applicant.

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_____ _____
(Printed Name) (Signature)

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To: Board of City of Marion Police and Fire Commissioners

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(Printed Name) (Complete Address)

_____, do certify that I do not hold any elected or appointed position in
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I have known Mr./Mrs. _____ for the past three (3) years and he/she is a person of good moral character, of correct and orderly deportment, of temperate, industrious habits, and in my opinion, is qualified in all respects of the position of Firefighter.

Additional Comments:

_____

_____

_____

_____

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_____

_____.

I ___ am ___ am not related to the applicant.

I further certify that I am willing that this Certificate of Good Moral Character be made public.

_____ _____
(Printed Name) (Signature)

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CREDIT REPORT AUTHORIZATION

The City of Marion, IL may obtain a consumer report (commonly known as a credit report) for employment purposes.

The Fair Credit Reporting Act provides:

A person (e.g., City) may not procure a consumer report, or cause a consumer report to be procured, for employment purposes with respect to any consumer unless:

1) A clear and conspicuous disclosure has been made in writing to the consumer at any time before the report is procured or caused to be procured, in a document that consists solely of the disclosure, that a consumer report may be obtained for employment purpose: and
2) The consumer has authorized the procurement of the report by that person.

AUTHORIZATION:

I, the undersigned, hereby authorize in writing, the procurement of a consumer report by the City of Marion, IL.

Date:_____

_____ (Printed Name)

_____ (Signature)

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BACKGROUND WAIVER

To Whom It May Concern:

I respectfully request that you forward to the Marion Fire and Police Commissioners any and all information that you may have concerning me, my work, or my reputation.

Please give any information that may appear in my personnel file. This information is to be used to determine my qualifications and fitness for the position I am seeking with the Marion Fire Department.

I hereby release you, and / or your employer from any liability and damage of any nature as a result of furnishing information requested above.

Date: _____

_____ Signature: _____

(Printed Name) Address: _____

_____

_____

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RULES AND REGULATIONS AGREEMENT

To: Board of Police and Fire Commissioners
City of Marion, IL

I hereby agree to abide by all rules and regulations of the Board of Fire and Police Commissioners for the City of Marion, IL during, and after taking the examination, and during any probationary period I might be appointed to and as a regular member of the Marion Fire Department.

Date: _____

_____ (Printed Name)

_____ (Signature)

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PRE-EMPLOYMENT CONTRACT

In reference to City of Marion Ordinance No. 1744, Amended by Ordinance No. 3040

SECTION ONE: Any applicant for a position in the Fire Department or the Police Department must agree to the following conditions at the time of making application for such position. Such conditions being as follows: That should he/she be hired as an employee of the City of Marion Police or Fire Department, he/she will not voluntarily or involuntarily separate from the employ of the City of Marion for a minimum of thirty-six (36) months from the date of hire has elapsed; otherwise, he/she will reimburse the City of Marion within twelve (12) months of separation of service for any and all costs incurred as enumerated in Section 2 below at the following rate:

(a) One hundred percent (100%), if separation is prior to thirty-six (36) months having elapsed from date of hire.

SECTION TWO: Schedule of costs which may be incurred by the City:

(a) Any pre-entry medical and psychological examinations required by the City of Marion Police and Fireman's Pension Fund.
(b) Basic training, including Fire Fighter Recruit Academy and Police Training Institute Recruit Academy, including lodging, meals, travel expenses, and initial uniforms.

SECTION THREE: The obligations under this agreement shall terminate after the completion of thirty-six (36) months from the date of hire.

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PRE-EMPLOYMENT CONTRACT, (CONT.)

SECTION FOUR: The applicant understands that employment with the City is contingent upon his/her completion of a probationary period of twelve (12) months and continued performance to the satisfaction of the City. Nothing contained herein shall be construed as a promise or agreement by the City to retain the applicant as an employee of the City for thirty-six (36) months or any portion thereof, or thereafter.

SECTION FIVE: The City does not, by this agreement, waive any of the rights, privileges, or prerogatives it possesses now or hereafter in effect.

SECTION SIX: The applicant acknowledges that he/she has examined this Agreement, that he/she has read and understands this Agreement, and he/she has the right to consult an attorney prior to entering this Agreement.

Printed Name of Applicant

Signature of Applicant Date

Printed Name of Witness

Signature of Witness Date

(Address of Witness)

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MEDICAL EXAMINER'S CERTIFICATE

Name of Applicant: _____

Address of Applicant: _____

_____

Telephone Number: _____

This is to certify that I have made a medical examination of the above person and find that he/she is physically able to take part in a physical fitness assessment consisting of:

- a distance run of one-half mile
- hose drag of 150 feet
- various equipment carries
- manikin drag
- 25 push-ups
- 30 sit-ups
- 3 chin-ups
- ladder climb
- various other tests of physical endurance

He/she will be participating in these exercises to demonstrate physical agility and strength in performing the duties of a firefighter for The City of Marion Fire Department.

Physician Printed Name: _____

Physician Signature: _____

Certification Level: _____

Physician Address: _____

_____

Dated: _____

NOTICE: To be completed by one of the following:
MD – Doctor of Medicine
PAC – Physician Assistant, Certified
NP – Nurse Practitioner
DO – Doctor of Osteopathic Medicine

CITY OF
MARION FIRE DEPARTMENT
FIRE CHIEF TIM BARNETT
204 NORTH COURT ST
MARION, IL 62959
Phone: 618-997-5730
fax: 618-997-5762
www.marionfire.us

PHYSICAL FITNESS ASSESSMENT RELEASE OF ALL LIABILITIES

I hereby release and discharge the City of Marion, a municipal corporation, its officers, servants, agents, and employees from any and all claims, demands, and liabilities to me and on account of any and all injuries, losses, and damages to my person that may have been caused by, or may at this time arise as the result of a certain Fire Department Physical Fitness Assessment conducted by The City of Marion Fire and Police Merit Board and its designees; the intention hereof being to completely, absolutely, and finally release said City of Marion and its officers, servants, agents, and employees from any and all liability arising wholly or partially from the cause aforesaid.

Dated this _____ day of _____, 20____.

_____
(Printed Name of Applicant)

_____
(Signature of Applicant)

_____
(Printed Name of Witness)

_____
(Signature of Witness)

Application For Employment

city of MARION

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Please Print

Position(s) Applied For	Date of Application

Last Name	First Name	Middle Name

Full Address

Telephone Number(s)	Social Security Number

Best time to contact you at home is:..... _____:_____ AM / PM

Have you ever filed an application with us before?..... ☐ Yes ☐ No
If Yes, give date _____

Have you ever been previously employed with The City of Marion?..... ☐ Yes ☐ No
If Yes, give date _____

Do any of your friends or relatives, other than spouse, work here?..... ☐ Yes ☐ No

Are you currently employed?..... ☐ Yes ☐ No

May we contact your present employer?..... ☐ Yes ☐ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?..... ☐ Yes ☐ No

Are you currently on "lay-off" status and subject to recall?..... ☐ Yes ☐ No

Can you travel if a job requires it?..... ☐ Yes ☐ No

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been provided.

Yes ☐ No ☐

THE CITY OF MARION IS AN EQUAL OPPORTUNITY EMPLOYER

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

1.	Employer	Dates Employed From	To	Work Performed
	Address			
	Telephone Number(s)	Hourly Rate / Salary Starting	Final	
	Job Title / Supervisor			
	Reason for Leaving			
2.	Employer	Dates Employed From	To	Work Performed
	Address			
	Telephone Number(s)	Hourly Rate / Salary Starting	Final	
	Job Title / Supervisor			
	Reason for Leaving			
3.	Employer	Dates Employed From	To	Work Performed
	Address			
	Telephone Number(s)	Hourly Rate / Salary Starting	Final	
	Job Title / Supervisor			
	Reason for Leaving			
4.	Employer	Dates Employed From	To	Work Performed
	Address			
	Telephone Number(s)	Hourly Rate / Salary Starting	Final	
	Job Title / Supervisor			
	Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business, or civic activities and offices held.
You may exclude membership which reveals gender, race, religion, nat. origin, age, ancestry, disability, or other protected status:

Applicant's Statement

I certify that answers given herein are true and complete.

I authorize investigations of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed forty-five days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at-will" nature, which means that the employee may resign at any time and the employer may discharge employee at any time with or without cause. It is further understood that this "at-will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of The City of Marion.

Signature of Applicant _____ Date _____

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview ☐ Yes ☐ No _____ Interviewer _____ Date

Remarks _____

Employed ☐ Yes ☐ No _____ Job Title _____ Hourly Rate / Salary

Department _____ Title and Name _____ Date