

Butler Community College Fire Department Fire Science Residency Program Application

Last Name	First Name		Middle Initial
Street Address	City	State	Zip Code
Home Phone	Cell Phone	Email	
Date of Birth Place of	Birth		
Driver's License Number		State of Is	sue
Emergency Contact Name			
Emergency Contact Address	City	State	Zip Code
Emergency Contact Home Phone	Cell Phone	Email	

Describe your	background	of experien	ce in fire or	anv other	related field.
Describe your	Sacingiounia	or experient		any other	related liela.

Describe your education and/or training as it related to the field of firefighting.

List Qualities you feel you Possess that are necessary to be a successful firefighter.

What is your declared college major?				
Are you currently enrolled in at least 12 college credit hours at BCC? YES / NO				
Do you possess a va	YES / NO			
Do you possess an	YES / NO			
Personal references (list two persons you have known for at least 5 years)				
1				
Nam	e Addre	ess Phone	Occupation	
2				

Address

Phone

Name

Occupation

Educational record:

From	То	School	Location	Credentials
Employme	ent record	:		
From	То	Employer	Address/Phone	Reason for leaving

Agreement

I certify that the answers given herein are true and complete to the best of my knowledge.

I authorize Butler Community College and all participating municipal fire departments to investigate all statements contained in this application for residency, as it may be necessary in arriving at an acceptable decision.

In the event of acceptance into the residency program, I understand that false or misleading information given in my application or interview may result in immediate discharge. I understand also, that I am required to abide by all rules and regulations, and Standard Operating Guidelines/Procedures of Butler Community College and the participating municipal fire department.

Signature of Applicant

Date

Submit completed applications to: Butler Community College Fire Science Residency Program 901 S Haverhill Rd El Dorado KS 67042