

****THIS IS NOT AN APPLICATION****



Mail to: Carlsbad Fire Dept.
409 S. Halagueno
Carlsbad, NM 88220
Phone: 575-885-3125
Email:
cfd.training@cityofcarlsbadnm.com

CARLSBAD FIRE DEPARTMENT EMPLOYMENT INTEREST FORM

This form is intended to provide individuals the opportunity to be entered in our employment interest database during those periods when the department is not accepting applications. If you are interested in seeking employment with the Carlsbad Fire Department, please complete this form and mail or email to the address listed above. We will notify you when we begin our next recruitment.

PLEASE PRINT LEGIBLY

____ New Information ____ Updated Information

PERSONAL INFORMATION			
Last Name:	First Name:	Middle:	Home Phone:
Mailing Address:		Apt #	Cell Phone:
City:	State:	Zip Code:	Additional Phone Number:
Email address:			Today's Date:

CERTIFICATIONS (SELECT ALL THAT APPLY)

- Firefighter I (IFSAC)
- Firefighter II (IFSAC)
- Firefighter I (ProBoard)
- Firefighter II (ProBoard)
- Nationally Registered EMT
- Nationally Registered AEMT
- Nationally Registered Paramedic
- New Mexico Licensed EMT-Basic
- New Mexico Licensed EMT-Intermediate
- New Mexico Licensed EMT-Paramedic

By checking this box, I agree that all information listed above is correct and accurate.

Signature