



Marengo Fire & Rescue Districts

120 E. Prairie Street, Marengo, Illinois 60152
(815) 568-8912 • www.MarengoFireRescue.org

Apprenticeship Program Application

Please complete all sections of this application. Incomplete applications may not be processed.

Personal Information

- Full Name: _____
- Date of Birth: _____
- Address: _____
- City/State/ZIP: _____
- Phone Number: _____
- Email Address: _____

Education

- High School Attended: _____

Employment History (if applicable):

- Previous Employer: _____
- Position Held: _____
- Dates Employed: _____

Licenses and Certifications:

- Do you have a valid driver's license? ☐ Yes ☐ No
- License Number/State: _____
- CPR/First Aid Certificate? ☐ Yes ☐ No If yes, expiration date: _____

Physical Fitness:

- Are you able to meet the physical requirements of firefighting duties? ☐ Yes ☐ No

Background Information:

- Have you ever been convicted of a felony? ☐ Yes ☐ No If yes, please explain:

- Are you willing to submit to a background check and drug screening? ☐ Yes ☐ No

- References:

- Name: _____ Relationship: _____ Phone: _____

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Personal Statement: (Briefly describe why you are interested in the Firefighter Apprenticeship Program and what qualities make you a good candidate.)

Applicant Signature: _____ **Date:** _____

Please submit this completed application form, along with copies of your driver's license, and any relevant certifications, to the fire department or apprenticeship coordinator as directed.

For more information or to apply, contact:

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Captain/Training officer
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