

Jefferson County Emergency Services District #5

Employment Application — District Administrator

Position Type: Part-time

Reports To: Board of Commissioners

Please complete all applicable sections. Attach a résumé and additional pages if needed.

1. Applicant Information

Information	Response
Full Name	
Mailing Address	
City, State, ZIP Code	
Telephone Number	
Email Address	
Application Date	
Earliest Available Start Date	
Desired Compensation	

Days and hours available: _____

Are you available to attend scheduled Board meetings? ☐ Yes ☐ No (4th Monday of the month at 6:00 pm)

Are you legally authorized to work in the United States? ☐ Yes ☐ No

2. Education and Training

School or Institution	Degree, Diploma, or Training	Completed?

Relevant certifications or professional training:

3. Relevant Skills and Experience

Indicate your experience with the following duties.

Skill or Responsibility	None	Basic	Proficient	Advanced
Office administration and correspondence	☐	☐	☐	☐
Microsoft Word and Excel	☐	☐	☐	☐
Accounts payable and invoice processing	☐	☐	☐	☐
Budget preparation and expenditure tracking	☐	☐	☐	☐
Payroll and quarterly tax reporting	☐	☐	☐	☐
Purchasing and purchase orders	☐	☐	☐	☐
Inventory management	☐	☐	☐	☐
Meeting agendas, packets, and minutes	☐	☐	☐	☐
Records management and retention	☐	☐	☐	☐
Grant applications and documentation	☐	☐	☐	☐
Governmental or emergency services administration	☐	☐	☐	☐

Accounting, payroll, or records-management software used:

4. Employment History

List your most recent employment first.

Current or Most Recent Employer

Information	Response
Employer Name	
Job Title	
Employment Dates	
Supervisor Name and Title	
Employer Telephone	
Reason for Leaving	
May We Contact This Employer?	☐ Yes ☐ No

Primary duties and accomplishments:

Previous Employer

Information	Response
Employer Name	
Job Title	
Employment Dates	
Supervisor Name and Title	
Employer Telephone	
Reason for Leaving	
May We Contact This Employer?	☐ Yes ☐ No

Primary duties and accomplishments:

Additional Previous Employer

Information	Response
Employer Name	
Job Title	
Employment Dates	
Supervisor Name and Title	
Employer Telephone	
Reason for Leaving	
May We Contact This Employer?	☐ Yes ☐ No

Primary duties and accomplishments:

5. Position-Specific Questions

Describe your experience preparing budgets, monitoring expenditures, or working with an accountant.

Describe your experience preparing meeting materials and maintaining official records.

Explain how you maintain accuracy when processing invoices, financial reports, and confidential information.

Describe any experience supporting a public agency, emergency services district, or volunteer fire department.

6. Professional References

Provide three professional references familiar with your work.

Name	Professional Relationship	Telephone or Email

7. Additional Information

Provide any additional qualifications relevant to this position.

8. Applicant Certification

I certify that the information provided in this application and any accompanying materials is true and complete to the best of my knowledge.

I understand that submitting this application does not guarantee employment. I authorize the District to contact the references and employers for whom I have provided permission to verify my qualifications and employment history.

Applicant Signature: _____

Printed Name: _____

Date: _____

District Use Only

Item	Notes
Date Received	
Reviewed By	
Interview Date	
Reference Checks	
Disposition	
Additional Notes	