Town of Petawawa Fire Department
HEADQUARTERS
1111 Victoria Street
Petawawa, Ontario
K8H 2E6
Phone (613) 687-5536 Fax (613) 687-7225

FIRE CHIEF STEVE KNOTT
sknott@petawawa.ca

Application for Employment

Name: _____ **Date**: _____ **/** _____ **/** _____
D M Y

Address: _____

Postal Code: _____ **Phone:** _____

Occupation: _____ **Employer:** _____

Driver's License Number: _____

Class: _____ **Endorsements:** _____

Related Experience: (Attach Certificates and / or Resume)

_____
_____
_____
_____

CURRENT FIRST AID CERTIFICATE – *YES / NO*
CURRENT CPR CERTIFICATE – *YES / NO*

For Office Use Only

Oral Interview: ____ / ____ / ____ *Physical Test: ____ / ____ / ____*
D M Y *D M Y*
Job Description Provided: ____ / ____ / ____
D M Y
Medical Test: ____ / ____ / ____ ***Acknowledged:*** *YES / NO ___ / ___ /___*
D M Y *D M Y*