



DUE DATE:
MONDAY, September 15, 2025.
MUST BE RECEIVED BY 4:30 P.M.

**CIVIL SERVICE BOARD
CITY OF ALLENTOWN, PENNSYLVANIA
AN EQUAL OPPORTUNITY EMPLOYER
APPLICATION FOR FIREFIGHTER WRITTEN EXAMINATION**

Attach and submit a \$60.00 non-refundable CERTIFIED BANK CHECK OR MONEY ORDER made payable to the City of Allentown along with this application. *NO personal checks or cash will be accepted.*

Completed applications are to be hand-delivered or mailed to the following address:
City of Allentown
Human Resources Department
435 Hamilton Street, Room 233
Allentown, PA 18101-1699

Please note that any applicant found not to meet the general requirements during any phase of the Entry Level Selection procedures will be immediately disqualified. The applicant will be notified in writing.

General Qualifications for Applicants

- | | | |
|--|------------------------------|-----------------------------|
| 1. Are you at least eighteen (18) years of age or older? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Do you now possess a current valid driver's license? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Do you possess a High School Diploma or Certified Equivalent? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Are you a U.S. Citizen? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. Are you claiming Veteran's Preference? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If yes, please provide a non-returnable copy of a DD214 to this application.

Please note that the only application attachment that will be accepted at this time is a military DD214.

1. NAME _____
First Middle Last
2. ADDRESS _____
Street City State Zip Code
3. TELEPHONE NUMBER _____
4. MOBILE OR ALTERNATE TELEPHONE NUMBER _____
5. EMAIL ADDRESS _____
6. SOCIAL SECURITY NUMBER _____

AUTHORIZATION AND CONSENT FOR RELEASE OF PERSONAL INFORMATION

As part of a normal procedure for processing applications, The Allentown Fire Department conducts background checks on potential employees. In order to continue the application process, a signed authorization and consent for release of personal information form is required.

I, _____, hereby authorize The Allentown Fire Department, and/or its agents to fully investigate my background, which I understand may include information regarding my references, character, past employment, education, credit history, driving record, criminal or fire records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information which may be material to my qualifications for employment now and, if applicable, during the time of my service with The Allentown Fire Department.

I hereby authorize and request any prior or present employer, law enforcement agency, credit investigation agency, financial institution, banks, lending company, credit card company, educational institution or other individuals or entities having personal data about me to furnish The Allentown Fire Department or any of The Allentown Fire Department's agents, with any and all records, files and other information (including fire records and juvenile records) in their possession with respect to me, in connection with my application for employment with The Allentown Fire Department.

Further, I hereby release from any and all liability and hold harmless all persons, institutions, or corporations supplying this information to The Allentown Fire Department, and release from any and all liability and hold harmless The Allentown Fire Department and its agents, from receiving and using such information. Upon written request from me, the City will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I understand and acknowledge that this Authorization is not an express or implied contract of employment nor shall it be interpreted as such.

The following is my true and complete legal name and all information contained herein is true and correct to the best of my knowledge. I also acknowledge that a facsimile (FAX) or photographic copy of this Release Agreement is as effective as the original.

This Release Authorization is valid for two (2) years from the date set forth below.

Applicant Signature: _____ Today's Date: _____

Printed Name: _____
First Middle Last

Street Address: _____

City: _____ State: _____ Zip Code: _____

Social Security Number: _____ - _____ - _____ Date of Birth: _____

Maiden Name: _____ Other last names used: _____



CITY OF ALLENTOWN

EQUAL EMPLOYMENT OPPORTUNITY DATA

The City of Allentown has a moral and legal commitment to provide equal employment opportunity and nondiscrimination in employment policies and practices on the basis of race, color, religion, sex, gender identity, sexual orientation, veterans status, political opinions or affiliations, lawful activity in any employee organization, national origin, age, disability, marital status, use of support animals because of physical disability of any individual or independent contractor, or because the user is a handler or trainer of support or guide animals. We are also required to make periodic reports based on these categories and are in violation of the law if we do not make such reports; therefore, we ask that you fill in the information requested below.

This information will not be used in any way to evaluate qualifications for employment or job performance. It will be used for statistical purposes only and will be kept in a confidential file separate from the attached application for employment. Please note that completion of this form is not mandatory.

Thank you for your help in this matter.

Please check where applicable (see other side for explanation of categories):

- | | |
|---|--|
| <input type="checkbox"/> White (Non-Hispanic or Latino) | <input type="checkbox"/> Asian or Pacific Islander |
| <input type="checkbox"/> Black (Non-Hispanic or Latino) | <input type="checkbox"/> American Indian or Alaskan Native |
| <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> Handicapped or Disabled |

Sex: ☐ Male
☐ Female

Date of Birth: _____

Age: _____

Are you a Veteran? Yes ☐ No ☐

Are you a Disabled Veteran? Yes ☐ No ☐

If yes, what is your VA disability rating? _____ %

There are no clear-cut scientific definitions of race that can be used for these categories. For these reporting purposes, a person may be included in the group to which she or he appears to belong, identifies with, or is regarded in the community as belonging to; however, no person should check more than one race/ethnic category. General definitions are as follows:

- a) The category "White" (not of Hispanic origin): All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- b) The category "Black" (not of Hispanic origin): All persons having origins in any of the Black racial groups of Africa.
- c) The category "Hispanic": All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- d) The category "Asian or Pacific Islander": All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. For example, this area includes China, Japan, Korea, the Philippine Islands, and Samoa.
- e) The category "American Indian or Alaskan Native": All persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.

The definition to be used for "Handicapped or Disabled" is:

"A person with a handicap or disability is any person who has a physical or mental impairment which substantially limits one or more of the person's major life activities, who has a record of such impairment, or who is regarded as having such an impairment."

Additional Qualifications for Applicants :

Effective January 1, 2026, all new hires of the CITY of Allentown Fire Department will have eighteen (18) months from their date of hire to establish residency within fifteen (15)miles of the CITY border as the crow flies.

Effective January 1, 2026, all firefighters at the time of hire shall be non-users of tobacco products as a condition of their employment and must refrain from using tobacco products in any form, including but not limited to smoking, chewing, or electronic delivery devices, at all times.