

## **BOONE COUNTY FIRE PROTECTION DISTRICT**



2201 I-70 Dr. NW -- Columbia, MO 65202 (573) 447-5000

## An Affirmative Action/Equal Opportunity Employer

## Position Applying For: TECHNICAL SEARCH SPECIALIST

Date Submitted: 9/15/2010 7:02:28PM

	Date Sub	milled: 9/15/201	10 7:0	2.28PW				
PERSONAL INFORMATION			-					
Name (Last)	(First)		(Mi	(Middle)				(SSN)
Hoevelmann	Jason		М					8664
	<b>'</b>	i						
(Address)		(City)			(State)		(Zip	))
848 Tall Timber Lane		Sullivan			МО		630	80
Telephone Number (Primary)	Telephone Numb	er (Secondary)		(Email)				
314-971-3485 (Cell)	636-583-7624 (Pa	ager) jhoevelm		jhoevelmanr	nn@gmail.com			
	<u> </u>							
(DOB)	(DLN)		(DLN State & Classifications)			(DLN	(DLN Exp)	
03/19/1972	T980473259		Missou	Missouri F			03/19/2016	
						•		
(Traffic Violation)								
NoNo								
(Felony Conviction)								
NoNo								
(US Citizen)								
Yes								
EMPLOYMENT HISTORY								
(Current Employer)	(Position)			(Start Date)		(Contact En	volan	er)
Florissant Valley Fire Protection District	Firefighter/Parar	medic		March 2000		Yes		,
(Contact Employer)			<u> </u>					
Yes								
	1				i			
(Employer)	(Position)			(Start Date)		(End Date)		
Sullivan Fire Protection District	Deputy Chief/Fir	e Marshal		1991		N/A		

(Contact Employer)	(Reason for Leavin	ıg)	<u> </u>			
Yes	Part time/volunteer					
(Employed Under Other Names)	No					
MILITARY						
(Branch)	(Dates of Service)		(Rank at Discharge) (Typ		/pe of Dishcharge)	
N/A						
(Discharge Date)	(Duties/Special Training)	)				
HIGH SCHOOL						
(School Name)	(School Address)		(Graduation Date)		on Date)	
Sullivan High School	Sullivan, MO		May 1990			
COLLEGE						
(College)		(From)		(То)		
East Central College Union, MO		9/1990		6/2004*		
(Units)	(Major)		(Degree)	(Year)		
AAS Degree in Paramedic Science 64+	Paramedic		AAS		2004	
		<u> </u>				
(College)		(From)		(To)		
Eastern Oregon University La Grande, OR		4/2007		6/2009		
(Units)	(Major)		(Degree)		(Year)	
62	Fire Service Administration		BS		2009	
TRADE SCHOOL						
(Trade Shool)		(Course)				
St. Louis County Fire Academy		Firefighter				

(From) 4/1996 LICENSES & REGISTRATIONS	(То)	(Hours Completed)					
(License/Registration) EMTP-P12273	(State & Number) MO		(Issuer)	(Expiration Date)			
CERTIFICATIONS  IS-800  MISCELLANEOUS FIRE DISTRICT INFORMATION							
(Residency Program) No	(How Heard About BCFPD) Friend		(Emergency Services Organization) No				

No	Friend	No				
REFERENCES						
(Name)	(Address)	(Relationship)	(Phone)			
Corey Rice	PO Box 475 Sullivan, MO 63080	Friend	314-650-9645			
(Name) Roger Ellison	(Address) 5675 N US Highway 67. Florissant, MO 63034-2603	(Relationship) Friend	(Phone) 314-313-3814			
(Name) Chris Williams	(Address) PO Box 475 Sullivan, MO 63080	(Relationship) Friend	( <b>Phone</b> ) 314-650-2655			