

**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: Volunteer

Date Submitted: 12/11/2008 10:22:49PM

PERSONAL INFORMATION

Name (Last) FAULKINGHAM	(First) NOLA	(Middle) M	(SSN) 9406
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(Address) 1700 FORUM BLVD APT 910	(City) COLUMBIA	(State) MO	(Zip) 65203
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Telephone Number (Primary) 2079926621 (Cell)	Telephone Number (Secondary)	(Email) FAULKINGHAMN@HEALTH.MISSOURI.ED U
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(DOB) 06/16/1983	(DLN) T211261005	(DLN State & Classifications) Missouri F,	(DLN Exp) 06/16/14
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(Traffic Violation) Yes -- MINOR SPEEDING VIOLATION

(Felony Conviction) No

(US Citizen) Yes

EMPLOYMENT HISTORY

(Current Employer) UNIVERSITY HOSPITAL	(Position) SECURITY	(Start Date) 10/08/2007	(Contact Employer) Yes
(Contact Employer) Yes			

(Employed Under Other Names) No

HIGH SCHOOL

(School Name) DEER ISLE STONINGTON HIGH SCHOOL	(School Address) DEER ISLE STONINGTON, MAINE	(Graduation Date) 06/2002
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COLLEGE

(College) UNIVERSITY OF MAINE (SYSTEM)	(From) JUNE 2002	(To) MAY 2007	
(Units) 51 CREDITS	(Major) CRIMINAL JUSTICE	(Degree) N/A	(Year)

(College) COLUMBIA COLLEGE, COLUMBIA MO	(From) 08/08	(To) PRESENT	
(Units)	(Major) CRIMINAL JUSTICE	(Degree) N/A	(Year)

TRADE SCHOOL

(Trade Shool) MAINE CRIMINAL JUSTICE PRE-SERVICE POLICE ACADEMY 100 HR	(Course) PRESERVICE POLICE ACADEMY	
(From) JUNE 2007	(To)	(Hours Completed)

CERTIFICATIONS

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MISCELLANEOUS FIRE DISTRICT INFORMATION

(Residency Program) Yes	(How Heard About BCFPD) Friend	(Emergency Services Organization) Yes
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(Service Department) UNIVERSITY VOLUNTEER AMBULANCE CORPS	(Position) AMBULANCE ATTENDANT		
(Dates of Service) APRIL 2003-JANUARY 2004	(City) ORONO	(State) ME	(Phone)

BCFPD KNOWN MEMBERS

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(Name) LARRY DUDLEY	(Station)
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(Name) IAN YOUNG	(Station)
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REFERENCES			
(Name) JOHN FISHER	(Address) SOUTHERN BOONE FIRE RESIDENT (ASHLAND)	(Relationship) CO-WORKER	(Phone) 573 289 5255
(Name) ESTHER MCCUNE	(Address) 1700 FORUM BLVD COLUMBIA, MO 65203	(Relationship) ROOMMATE	(Phone) 8163089790
(Name) ASHLEY ALLISON	(Address) ASHLAND, MO BOONE HOSPITAL	(Relationship) FRIEND	(Phone) 573 823 9114