

# GEORGINA FIRE DEPARTMENT

## APPLICATION FOR POSITION

### of

## VOLUNTEER FIREFIGHTER

Information on this form is not intended to be in contravention of the principles or intent underlying the Human Rights Code and will not be used as the basis of discriminatory treatment. All pages must be completed in full. **ALL SECTIONS of this application must be completed. A failure to complete all portions of the application could result in rejection of your application.**

### **PERSONAL INFORMATION:**

Surname	Given Name & Initial	Home Telephone #	Cell # (optional)
Email Address (optional)			

**ACTUAL STREET ADDRESS of your permanent residence:**

**YOU MUST BE A PERMANENT RESIDENT OF THE TOWN OF GEORGINA TO BE A VOLUNTEER FIREFIGHTER (UNLESS OTHERWISE AUTHORIZED BY THE FIRE CHIEF).**

Street Name + Number	Apt #	Town	Province <b>Ontario</b>	Postal Code
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**MAILING ADDRESS - if different from above:**

eg: Rural Route Address, P.O. Box , etc,	How long have you lived at this address? _____ years
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### **Availability for Response to Alarms and Training**

▶ Will you be able to participate in scheduled bi-weekly training sessions? <b>yes</b> <input type="checkbox"/> <b>no</b> <input type="checkbox"/>	What is your work schedule?
▶ Will you be able to attend the occasional training or education opportunity that may take you away from home for up to a week at a time? <b>yes</b> <input type="checkbox"/> <b>no</b> <input type="checkbox"/>	Shift Worker?: <input type="checkbox"/> Shift:
<i>It is important that your employer is aware that you have applied to be a volunteer firefighter, as it may require you to be away from your employment at various times, depending on your schedule.</i>	Day worker?: <input type="checkbox"/> Usual Days and Hours Worked? :
▶ Have you spoken with your employer regarding applying for this position? <b>yes</b> <input type="checkbox"/> <b>no</b> <input type="checkbox"/>	Work Location:
<i>PLEASE NOTE: If you advance to the final stages of the recruiting process, a letter from your employer stating that they are aware of your intentions and commitment as a volunteer firefighter <b>may</b> be required to be submitted with final paperwork.</i>	
▶ Will your employer allow you to leave work to attend emergencies? <b>yes</b> <input type="checkbox"/> <b>no</b> <input type="checkbox"/>	
▶ When <u>not</u> at work, are you around Town <u>and</u> will you be available to attend emergencies? <b>always</b> (90%) <input type="checkbox"/> , <b>usually</b> (75%) <input type="checkbox"/> , <b>sometimes</b> (50%) <input type="checkbox"/> , <b>seldom</b> (25%) <input type="checkbox"/>	
▶ Does your family support you becoming a volunteer firefighter? <b>yes</b> <input type="checkbox"/> <b>no</b> <input type="checkbox"/>	
Are you legally entitled to work in Canada? <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/>	Are you at least 18 years of age? <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/>
Have you ever been convicted of a criminal offence for which a pardon has not been granted? <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/>	

**EXPERIENCE: List your current employer**

Name of Current Employer	Address	Telephone #
Position Held		
Name of Supervisor	Start Date (mm/dd/yyyy):	

**OTHER EXPERIENCE:**

Volunteer Work: Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, explain:	Dates
Previous Firefighter experience: Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, explain:	Dates
Military, Police or EMS Service: Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, explain:	Dates

Additional **related** work experience that you might have?


**DRIVING EXPERIENCE:**

Do you have a Valid Ontario Driver's License: Yes <input type="checkbox"/> No <input type="checkbox"/>	Driver class: AZ <input type="checkbox"/> D <input type="checkbox"/> DZ <input type="checkbox"/> F <input type="checkbox"/> G <input type="checkbox"/> Other <input type="checkbox"/>
Have you had any experience or training in driving heavy vehicles? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please explain:
Do you own a motor vehicle that is available to you at all times? Yes <input type="checkbox"/> No <input type="checkbox"/>	If no, please explain:

Prior to being appointed as a Volunteer Fire Fighter, the applicant will be required to provide an acceptable driver's abstract from the Ontario Ministry of Transportation and Criminal Reference Check.

**EDUCATION:**

	Grade/Years Completed	Program	Type of Degree/Diploma
High School			
Trade School			
College			
University			

**SKILLS**      Check the appropriate box below.

**Skill Level 1:** A Trade License or recognized certificate is held, or significant professional experience has been acquired. Proof must be submitted (copies only).

**Skill Level 2:** Some familiarity and competence has been acquired through personal experience, high school course or other training of a relatively informal nature.

**Skill Level 3:** No formal or significant experience skills.

	SKILL LEVEL			Certificate
	1	2	3	(check if attached)
Athletic/Sports/Fitness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building Technology (formal training or certified trades)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cardio-pulmonary Resuscitation (CPR)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climbing Skills – ladder/mountain/rope	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coaching/teaching/counselling/recreation leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community College Firefighter preparation courses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Computer Technology/Electronic Systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire Safety Systems - Courses or experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First-Aid course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge of breathing apparatus – SCUBA diving, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical – office/motor/equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Occupational Health & Safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Previous firefighting experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Read blueprints/charts/diagrams/maps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rescue procedures; i.e., lifeguard, auto extrication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please list any additional skills, education or experience that you already have and that you think might/would benefit you as a firefighter:


**OTHER INFORMATION:**

If you have any additional information that you feel is relevant you may provide it here or on attached sheet(s). If using an attached sheet(s) please place your name and the date on every sheet.


**DECLARATION:** Read the following carefully and sign and date the page at the bottom.

**I understand and agree that employment and continuing employment as a Volunteer Firefighter is conditional, IN PART, upon:**

- (a) The verification of statements made by me in this application and on any attached sheets
- (b) Be a resident of the Town of Georgina
- (c) Be at least 18 years of age and legally employable in the Province of Ontario.
- (d) Have completed high school, or have equivalent education and experience.
- (e) Have good oral and written communication skills.
- (f) Be of sound mind and body as required to perform the duties of a firefighter.
- (g) Be of good character, be strongly motivated, and exhibit a positive attitude.
- (h) Be willing and able to learn, to take direction, and to be a team player.
- (i) Be available to attend training, to attend emergencies, and to attend other activities as required.
- (j) Hold a valid driver's license and be able to obtain within one (1) year a class "D" license with "Z" endorsement.
- (k) Have a suitable vehicle available to transport yourself, at any time, to the fire hall as directed.
- (l) Obtain an acceptable criminal record clearance and have a good driving record.
- (m) Observance of rules, regulations and instructions governing employment by the Corporation as in effect at the time of employment, or established at any subsequent time
- (n) Successfully complete the recruit training program
- (o) Satisfactory completion of a one year (1) probationary period of employment
- (p) Maintain and care for all uniforms, protection clothing and equipment and supplies that are issued to me

**APPLICANT'S AGREEMENT**

I certify that all of the above information given by me is accurate and complete and that I have read and understand the information package received. I also understand that if employed, falsified information on this application shall be considered sufficient cause for dismissal.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

**"Personal information on this form is collected under the legal authority of the Municipal Act, R.S.O. 1980, c.302 as amended, and will be used to determine eligibility for employment. Further information concerning the collection of personal information should be directed to the Human Resources Manager, Town of Georgina, 26557 Civic Centre Road, Keswick, ON L4P 3G1 (905) 476-4301."**

NOTE: APPLICATIONS WILL BE KEPT ON FILE FOR ONE YEAR

**REMINDER:** Have you included copies of information, certificates or other items where required?

The screening process for the selection of volunteer firefighters is detailed. It is deliberately so to ensure that Candidates become aware of the degree of skill, commitment, and personal character required to become a successful volunteer firefighter.

The selection process to achieve full membership in the fire department consists of the following steps:

- (1) Application Review
- (2) Contact Candidates
- (3) Orientation Session
- (4) Testing Session
- (5) Interviews
- (6) Preliminary Selection
- (7) Sector Screening, Medical Availability and Drivers Abstract
- (8) Reference Checks
- (9) Notification

Applicants will be notified at each stage of their eligibility to proceed to the next step in the process. Applicants who do not receive notification to continue are no longer being considered for this competition.

**PLEASE DO NOT WRITE BELOW THIS LINE**

(To be completed by Fire Chief or designee)

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Date of Birth: \_\_\_\_\_ (dd/mm/yy) Proof of Age: \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed \_\_\_\_\_

Social Insurance Number: \_ \_ \_ \_ \_

Person to be notified in case of emergency:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Any other pertinent information: \_\_\_\_\_

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