



APPLICATION FOR POSITION OF VOLUNTEER FIREFIGHTER

Information requested 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 OF THIS APPLICATION MUST BE FILLED OUT COMPLETELY. You are also encouraged to submit a resume with this application.

PLEASE PRINT OR TYPE.

Surname: _____ Given Name (s): _____

Address: _____

Telephone Number (s): _____ (work) _____ (home)

Are you between 17 and 65 years of age? YES: _____ NO: _____

Date of Birth _____ SIN # _____ Health Card # _____

Phone Number _____ Address _____

Email _____ Cell # _____ Cell Carrier _____

Driver's License # _____

ARE YOU LEGALLY ENTITLED TO WORK IN CANADA?

Those legally entitled are Canadian Citizens, Permanent Residents

Landed Immigrants or those who hold a work permit: YES: _____ NO: _____

Highest educational standing - grade, diploma, partially completed program, etc...

EMPLOYMENT EXPERIENCE:

(Employment reference check may be made after the final selection is completed.)

Present Company: _____

Address: _____ Telephone No.: _____

Position/Duties: _____

Employed From: _____ (month/year) To: _____ (month/year)

Reason for Leaving: _____

Last Previous Company: _____

Address: _____ Telephone No.: _____

Position/Duties: _____

Employed From: _____ (month/year) To: _____ (month/year)

Reason for Leaving: _____

OTHER EXPERIENCE:

Previous Firefighting Experience? YES: _____ NO: _____

If yes, explain (number of years /months): _____

Volunteer Work? YES: _____ NO: _____

If yes, explain (number of years/months): _____

Military or Police Service? YES: _____ NO: _____

If yes, state rank and type of duties: _____

RELATED SKILLS

PLEASE COMPLETE THIS SECTION EVEN IF A RESUME IS SUBMITTED

INDICATE SKILL LEVEL BY CHECKING APPROPRIATE BOX BELOW AND GIVE EXPLANATION WHERE INDICATED:

- SKILL LEVEL 1 - A trade licence or recognized certificate is held, or significant professional experience has been acquired.
- SKILL LEVEL 2 - Skills are at an advanced level, acquired through relatively intensive personal involvement and/or post secondary courses.
- SKILL LEVEL 3 - Some familiarity and competence has been acquired through personal experience, high-school courses or other training of a relatively informal nature.
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	SKILL LEVEL		
	3	1	2
Mechanical - appliance/office/motor/equipment: Explain: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pumps, valves, sprinkler systems: Explain: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Breathing apparatus: Explain: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical systems: Explain: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electronic systems / computer technology: Explain: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climbing Skills: Explain: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SKILL LEVEL

3 1 2

Rescue procedures (ie) nursing, lifeguard:

Explain: _____

Knowledge of fire safety practices:

Explain: _____

Buildings - inspection / maintenance / design:

Explain: _____

Read blueprints / diagrams / charts:

Explain: _____

Athletic / sports / fitness:

Explain: _____

Coaching / teaching / counseling / child-geriatric care / recreation

Leadership:

Explain: _____

Languages other than English:

YES NO

Explain: _____

First Aid / Nursing / Pre-Hospital Emergency Care:

YES NO

Explain: _____

Cardio-pulmonary resuscitation:

YES NO

Explain: _____

Occupational Health & Safety:

YES NO

Explain: _____

WHAT ADDITIONAL SKILLS, KNOWLEDGE AND EXPERIENCE DO YOU FEEL WILL QUALIFY YOU AS A FIREFIGHTER?

DRIVING EXPERIENCE:

Valid Ontario Driver's License? YES: _____ NO: _____

Driver Class: _____ Other: _____

Have you had any experience or training in driving heavy vehicles? YES NO

Explain: _____

Have you any other driving skills? YES NO

Explain: _____

To assist us with future recruitment activities, please indicate how this Fire Department came to your attention:

PRINTED MEDIA - Name of Publication: _____

POSTER ADVERTISING - Specify Billboard, etc.: _____

SCHOOL / COLLEGE - Name of School: _____

RECRUITING PRESENTATION - Specify Location: _____

PERSONAL REFERRAL: _____

OTHER - Specify: _____

CONDITIONS OF EMPLOYMENT:

It is understood and agreed that any misrepresentation made by me in connection with any phase of this program and/or with this application, will be sufficient cause for cancellation of the application. I authorize the Clerk and the McDougall Fire Chief to make such inquiries respecting the foregoing information as may be deemed necessary.

IF SELECTED:

I shall abide by, and be subject to:

Rules and Regulations of the McDougall Fire Department.

DATE: _____ SIGNATURE OF APPLICANT: _____

OFFICE USE ONLY

FAVORABLE: () UNFAVORABLE: () EXTRA INTERVIEW REQUIRED: ()

FIRE CHIEF: _____