

Elizabethtown Fire Department

Application

In order to be considered for employment with the Elizabethtown Fire Department the documents listed below must be turned in together. Failure to provide any of the documents requested will remove you from the application process. The documents requested are part of the application process.

1. Application (completed)
2. Copy of Birth Certificate
3. Copy of Driver's License
4. High School Diploma or (current report card)
5. College Diploma or Transcript (if applicable)
6. Criminal History from the Clerk of Court
7. DD 214 – Military Discharge Form (if applicable)
8. Certified copies of any criminal charges with disposition of same
9. Signed Authorization for Release of Information
10. Copy of any current certifications that may apply
11. Junior Documents signed by parent or guardian

(Applicant signature)

(Date)

Elizabethtown Fire Department Authorization and Release to Obtain Information

I _____, authorize the Elizabethtown Fire Department to conduct a background investigation in connection with my application for employment.

I understand that I will not receive and am not entitled to a copy of the report or to know its contents, and I further understand that the contents of this report are privileged. I agree to give any further information which may be required in reference to my past record. I fully understand all information gained from such investigation is confidential and will be released only to authorized persons in the employment process.

This investigation may include information from educational institutions, physicians, and/or medical records, insurance companies, military organizations, police and/or court records, Department of Motor Vehicles records, personal references, developed references, previous and current employers. I authorize the release of any information that the Elizabethtown Fire Department may request from the above sources.

I hereby release the Town of Elizabethtown, Elizabethtown North Carolina, or any of its agents or representatives and any person so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such document, records, and other information for the investigation made by the Elizabethtown Fire Department.

Signature

Date

Agreement between Elizabethtown Fire Department And New Member

I, _____, agree that my first twelve months I am considered a probationary firefighter. I also understand that if I don't comply with the training requirements that I may be dismissed from Elizabethtown Fire Department. I am expected to comply with annual training requirements. I understand there will be mandatory training classes occasionally. During my first year of membership I shall complete the following:

EFD Physical Agility Test (annual requirement)
NFPA 1403 training
EVD – Emergency Vehicle Driver
NIMS 100, 200, 700, & 800

I, _____, understand the fire department can provide me transportation to said classes if a vehicle is available. I know the NFPA 1403 training does not give me my Firefighter Certification it only gives me the capability to perform firefighting activities particularly inside of structures. However at the end of my second year on the department I must have North Carolina Firefighter I & II Certification, failure to do so and I will be subject for termination. I also understand there will be other CDC (career development courses) I will need to obtain. It is recommended I take the EMT-Basic class and obtain North Carolina Certification but is **not mandatory**.

I agree to all the terms above and acknowledge that I will be dismissed if failure to comply with guidelines set forth.

(Print Name)

(Date)

(Witnessing Fire Officer)

(Date)

(Fire Chief's Signature)

(Date)

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Elizabethtown Fire Department Personal Protective and other Equipment Agreement

I, _____, understand and agree that I will be issued a set of NFPA compliant structural turnout gear. I will be solely responsible for the care of it and its well-being. I will be issued one set initially and am expected to keep up with every piece of it. My total set will include a helmet, nomex hood, structural gloves, leather work gloves, turnout coat, turnout pants, turnout boots, and reflective vest. It will be my responsibility to maintain it and keep it clean. I understand that I must wash it at least every 6 months and sometimes before depending on how I use it (example: a fire or other emergency where my gear is saturated with smoke, harmful toxins, chemicals, etc.). If I lose any piece of my equipment I shall be prepared to explain to the Chief and Deputy Chief what happened to it and possibly pay for the purchasing of a new piece. If the situation deems an investigation then there will be fire officers assigned to this case and after their preliminary findings the case will be turned over to the proper law enforcement agency if necessary. I know and understand there will be an inventory done once a year on a date posted by a Captain or Lieutenant.

I, _____, I fully understand the above statements and agree to comply at all time.

(Signature)

(Date)

(Witnessing fire officer)

(Date)

(Chief's Signature)

(Date)

Elizabethtown Fire Department
401 West Swanzy Street
Post Office Box 716
Elizabethtown, North Carolina 28337

General Information

Full Name of Applicant: _____
(First) (Middle) (Last)

Address: _____

Date of Birth: _____ Place of Birth: _____

Social Security Number: _____

Phone Number: (Home) _____ (work) _____
(Cell) _____

Email Address: _____

Current Employer: _____

Employer's Address: _____

Employer Phone: _____ How Long? _____

Can you leave for fire alarms? Yes _____ No _____ Do you work a shift? Yes _____ No _____

What hours would you not be available? _____

Do you have a valid North Carolina Driver's License? Yes _____ No _____

If so, what is your NCDL#? _____ Class (A) (B) (C) (circle only one)

Have you ever been convicted of a traffic violation? Yes _____ No _____

Have you ever been convicted of a criminal violation? Yes _____ No _____ If yes, please explain in detail: _____

Education

Highest grade completed? _____

Have you attended college? Yes _____ No _____

If so, what is the name of the college? _____

Do you have any firefighting or emergency medical service experience? Yes _____ No _____

If yes, briefly explain: _____

Emergency Contact Information

Emergency Contact Person: _____

Relationship: _____

Emergency Contact Phone #1: _____

Phone #2: _____

Emergency Contact Person's Employer: _____

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Physical and Medical

Are you allergic to any medication? Yes _____ No _____ If yes, please list: _____

Are you allergic to any foods or any other items? Yes _____ No _____

Do you have a fear of heights? Yes _____ No _____

Do you have a fear of confined spaces? Yes _____ No _____

Do you have any physical or medical conditions which would prevent you or hinder you from performing extremely exhausting physical labor? Yes _____ No _____ If yes, please explain: _____

Will you provide a Doctor's authorization for firefighting? Yes _____ No _____

Please explain briefly in one paragraph why you are a good candidate for Firefighter of the Elizabethtown Fire Department: _____

Signature _____

Date _____

Mail or Hand Deliver to: Elizabethtown Fire Department
Nick West, Fire Chief
401 West Swanzy Street
Post Office Box 716
Elizabethtown, NC 28337

Below is for agency use only

Applicant Approval:

(Check one) _____ Approved for membership / Date Joined: _____
(Month) (Day) (Year)

_____ Disapproved for membership

(Check one) Past member of EFD? ____ Yes ____ No

Date left agency: _____

Reason for leaving: _____

