

Career Profile Application Form



Volunteer Firefighter Position Fire and Emergency Services

A cover letter, resume and application must be submitted by email and will be accepted up to jobs@loyalist.ca

Please Print:

Name:	(first name or name known by)			(last name)		
Address:	Civic Street Address					
	Apartment/Unit#			PO Box		Rural Route
	City/ Town				Postal Code	
Telephone:	Home			Cell		
	Work					
Email Address:						

Thank you for your interest in this posting. Please read the following information to assist you with completing this document:

- You will be required to submit a **resume, cover letter and application** in order to be considered for this position. You also need to include detailed information regarding your related experience.
- Please attach your **resume** and cover to the front of this application. Failure to submit your **resume** will forfeit your opportunity to apply for this position.
- In the information boxes provided under the questions below, you will list the top three positions (including years in each position), job titles, and details of your work experience/skills. Failure to complete will forfeit your opportunity to apply for this position.

Location applying to:

- | | | |
|---|---|---|
| <input type="checkbox"/> Odessa Station
51 Main Street Odessa | <input type="checkbox"/> Amherst Island Station
955 Stella Forty-Foot Rd Stella | <input type="checkbox"/> Amherstview Station
363 Amherst Drive, Amherstview |
| <input type="checkbox"/> Bath Station
241 Church Street
Bath | <input type="checkbox"/> Unsure
<input type="checkbox"/> No preference | |

Availability:

I am available for duty as follows:

- Days Evenings Saturdays Sundays Holidays

Education/Specialized Training/Skills:

Do you possess an Ontario Secondary School Diploma (OSSD – Grade 12) or academic equivalency?

- Yes No In Progress

Although not required, an asset to this position would be the Pre-Service Firefighter Education & Training Certification to NFPA1001 Firefighter Level I & II, or received the NFPA 1001: Firefighter Level I & II Certificate endorsed by ProBoard and/or IFSAC. Please indicate which of the following apply.

NFPA1001 Firefighter Level I

- Not applicable In progress Completed

NFPA1001 Firefighter Level II

- Not applicable In progress Completed

Pre- Service Firefighter Education & Training

- Not applicable In progress Completed

From which educational institute:

Although not required, an asset to this position would be the NFPA 472 Hazardous Materials Operations level course.

- Not applicable In progress Completed

Although not required, an asset to this position would be the EMR (Emergency Medical Responder) Certificate. Please indicate which of the following apply.

- Not applicable In progress Completed

Other Fire/Medical Specific Training and/or Courses:

Please list any further education you have completed, as applicable:

	Course or Subject	Certificate/Diploma/Degree	Completed
Technical/Vocational			<input type="checkbox"/> Yes <input type="checkbox"/> No
College/University			<input type="checkbox"/> Yes <input type="checkbox"/> No

Experience:

Do you have prior Firefighter experience? (volunteer or career) Yes No

Please check all areas that you have previous work experience:

Fire suppression	<input type="checkbox"/> Yes <input type="checkbox"/> No	Construction	<input type="checkbox"/> Yes <input type="checkbox"/> No
Trades	<input type="checkbox"/> Yes <input type="checkbox"/> No	Mechanical	<input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency medical	<input type="checkbox"/> Yes <input type="checkbox"/> No	Heavy Equipment	<input type="checkbox"/> Yes <input type="checkbox"/> No
Fire prevention	<input type="checkbox"/> Yes <input type="checkbox"/> No	None of the above	<input type="checkbox"/>
Heavy Highway Vehicles	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Licence Requirements:

Please indicate the valid licence(s) held:

- G A B C D Z
 Other Please Specify: _____

Standard First Aid Certificate

- Yes, and valid Yes, but expired. No, but am willing to work toward obtaining.

AED Certificate

- Yes, and valid Yes, but expired. No, but am willing to work toward obtaining.

CPR "C" Level (Basic Rescuer or above) certificate

- Yes, and valid Yes, but expired. No, but am willing to work toward obtaining.

Equivalency Statement:

Please indicate the amount of time you have spent doing work related to that expected in the role you are applying.

Number of Years:	Number of Months:	Job Title(s):	Employer(s):
<input type="checkbox"/> Part Time	<input type="checkbox"/> Full Time	<input type="checkbox"/> Coop/Placement	<input type="checkbox"/> Volunteer
<input type="checkbox"/> Other - Please specify: _____			

Job Requirements, Duties and Responsibilities:

I am a resident of Loyalist Township. Yes No

This job requires the following. Are you willing and able to perform the following duties?

Duty	Willing	Able
Team Work	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lifting, pulling, pushing, dragging, carrying excessive weight	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Decision Making	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Handles Pressure	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Deals with Uncertainty	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Objectivity	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Dependability	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Emotional Control	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Integrity	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Work at heights	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Work in darkness	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Work in confined spaces	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Wear supplied safety equipment	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Working with others	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Continuous Training	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Equipment and apparatus inspection, test and maintenance.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Fire prevention and public education programs	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Respond to emergencies including but not limited to fires, motor vehicle accidents, medical emergencies, technical rescues, ice and water rescues, natural disasters, industrial accidents, hazardous material incidents, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Acknowledgement of Duties, Responsibilities and Other Requirements:

I acknowledge that I am aware of and in agreement to the duties, responsibilities and other job requirements as outlined above. I understand that the position is expected to be professional and take pride in their work. I understand that the duties listed above are not to be construed as all inclusive

Yes

Work Environment:

Work in emergency conditions frequently involve considerable hazard. Are you willing/able to work in these conditions?

Yes No

This position may require the incumbent to work at various sites throughout Loyalist Township as well as neighboring municipalities. Are you willing/able to work at the various locations?

Yes No

Related Employment:

- Please describe in detail in the information boxes below, your top three (3) positions where you gained work experience **related** to the role you are applying for.
- Include when and where you obtained the experience (names of employers, job titles, dates in positions, your experience as it relates to the requirements based on this question and the job posting). If you missed including details for a given question you will not receive recognition for where have not provided an answer.

Employer:	Job Title (include employment dates):	Related Experience:

Language:

This position requires the candidate to speak, read, write and understand the English language in high pressure situations.

Are you able to understand and willing to communicate using the English language as follows?

- Speak Yes No
- Read Yes No
- Write Yes No
- Understand Yes No

Although not required, it would be an asset to this position if the candidate was able to speak, read, write and understand the French language in high pressure situations. Are you able to understand and willing to communicate using the French language as follows?

- Speak Yes No
- Read Yes No
- Write Yes No
- Understand Yes No

Employment Status:

Are you currently, or have you previously been employed by Loyalist Township?

- Yes, I am currently employed by Loyalist Township.
- I have previously been employed by Loyalist Township.
- No, I have not previously been employed by the Loyalist Township.

Are you a former seasonal employee, previously employed by Loyalist Township?

- Yes, I am.

Please note that previous seasonal hires must re-apply and have received a favourable re-hire status on the end of season performance evaluation. (Information will be verified at time of consideration).

Volunteer/Community Service:

Have you had any community service involvement? Yes No

If yes, please describe:

Volunteer Location	Responsibilities	Dates

Requirements Upon Hire:

To be eligible to apply for positions, you must meet the following criteria:

- Must be 18 years of age or older at the time of application.
Are you 18 years of age or older? Yes No

If you are not yet 18, when will you be?

Month	Year

- Must be legally entitled to work in Canada. Are you legally entitled to work in Canada (citizen/landed immigrants)? Yes No

Applicants offered a position/conditional offer of employment will be required to undergo a medical exam. Employment reference checks will be conducted, documented proof of your education will be required and applicants will be required to (at their own expense) provide a current criminal reference check, including a vulnerable sector search, proof of a valid unrestricted “D-Z” driver’s licence and a driver’s abstract. Applicants will also be required to provide documented proof of vaccinations.

If an applicant is found to have falsified credentials or have misrepresented themselves, their application file will be permanently closed.

Should an offer be extended, prior to the first day on the job, I am aware that I will be required to:

Completion of a Criminal Background and Vulnerable Sector Check with favourable results at your own expense.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Complete a Medical exam.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Provide employment references for verification.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Provide proof of education verification.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Proof of a valid unrestricted Driver’s Licence and favourable results of a Driver’s Abstract in good standing at your own expense.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Provide documented proof of vaccinations.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Be in possession of and present a Social Insurance Number at time of hire.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have my current employers’ permission to attend fires.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I am aware that I must live and/or work within the geographical limits of the station I am employed.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I am aware that I must be clean shaven for the duration of employment and agree to this condition of employment.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable
I understand that if an applicant is found to have falsified credentials or have misrepresented them self, their application file will be permanently closed	<input type="checkbox"/> Yes <input type="checkbox"/> No

Disclaimer:

I am aware that Personal information is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act and is used to determine eligibility for potential employment.

Yes

I am aware that, in accordance with the Accessibility for Ontarians with Disabilities Act, Loyalist Township is pleased to accommodate individual needs of applicants with disabilities within the recruitment process. I am aware that I am to call Natasha Moon at (613) 386-7351 ext.149 or email (nmoon@loyalist.ca) if I require an accommodation to ensure participation in the recruitment and selection process.

Yes

Where did you first become aware of this job opening?

- The Loyalist Township website at <http://www.loyalistship.ca>
- Through our job subscription (signed up for notification when a job was posted)?
- Through <https://www.facebook.com/>
- Through Twitter: <https://twitter.com/>
- Through www.indeed.ca
- Through a newspaper ad. If yes, which one?_:
- Through a referral? If yes, who?:
- Through another source? If yes, where/who?:

Certification of Application:

I certify that the information contained in this application is true and complete to my knowledge. I understand that a false statement may disqualify me from my employment or cause my dismissal.

- Yes

Completed by (please print): _____

Signature

Date completed