



South Bruce Peninsula Fire Department Application Form – Volunteer Firefighter

PERSONAL INFORMATION

Last Name _____ Given Names _____

Current Address _____

Telephone _____ Cell Phone _____ Business _____

VOLUNTEER ELIGIBILITY REQUIREMENTS

1. What hours would you be available for training?
Weekdays Weekends Weeknights Other
2. What hours would you be available to respond to emergency response calls?
Weekdays Weekends Weeknights Other
3. Are you legally eligible to work in Canada? Yes No
4. Are you able to understand oral and written English? Yes No
5. Have you ever been convicted of a criminal offence for which you have not received a pardon? Yes No
Describe _____

EMPLOYMENT EXPERIENCE

Present Employer

1. Company name _____
2. Contact name _____
3. Address _____
4. Telephone _____
5. Your position _____
6. How long have you been employed there? _____
7. Duties _____

8. May we contact this employer? Yes No

Previous Employer

1. Company name _____
2. Contact name _____
3. Address _____
4. Telephone _____
5. Your position _____
6. How long have you been employed there? _____
7. Duties _____

8. May we contact this employer? Yes No

VOLUNTEER EXPERIENCE

1. Volunteer organization _____
2. Contact name _____
3. Address _____
4. Telephone _____
5. Your position _____
6. Your length of service _____
7. Duties _____

8. May we contact this organization? Yes No

RELATED SKILLS OR EXPERIENCE

1. Previous firefighting or emergency response experience? Yes No
Describe _____
2. Other experiences that may apply to this position? Yes No
Describe _____

Related Skills				
Indicate skill level by circling the appropriate number and providing explanation				
1=A trade, licence, recognized certificate or extensive experience				
2=Advanced skills level and/or post secondary courses or apprenticeships				
3=Familiarity acquired through personal experience, high school courses or related training				
Skill	Skill Level			Explanation
Mechanics	1	2	3	
Pumps, valves or sprinklers	1	2	3	
Electrical systems	1	2	3	
Electronic systems	1	2	3	
Computer technology	1	2	3	
Breathing apparatus	1	2	3	
Building construction or design	1	2	3	
Blueprint reading	1	2	3	
Firefighting tasks	1	2	3	
Rescue procedures	1	2	3	
Athletic sports or skills	1	2	3	
Languages	1	2	3	
Occupational health and safety	1	2	3	
Fundraising	1	2	3	
Office equipment	1	2	3	
Typing, filing or telephones	1	2	3	
Teaching, facilitation or coaching	1	2	3	
Events coordination	1	2	3	
Radio communication	1	2	3	
Professional driver	1	2	3	
Heavy equipment operation	1	2	3	

Other Licences and Certificates

1. CPR Level _____ Expiry Date _____
2. First Aid Level _____ Expiry Date _____
3. Defibrillation Level _____ Expiry Date _____
4. Drivers Licence Class _____
5. Other _____

EDUCATION BACKGROUND

1. Secondary School Name _____
2. Highest Grade Completed _____ Certificate Received Yes____ No____
3. Do you possess a "Pre-service Firefighter Education and Training" from a community college? Yes No Date of certification _____
4. Post Secondary Education _____
5. Major or Specialization _____
6. Level or Degree Achieved _____ Certificate Received Yes____ No____

PERSONAL REFERENCES

Reference One

Individual Name _____

Number of years knowing this person _____ Telephone _____

Reference Two

Individual Name _____

Number of years knowing this person _____ Telephone _____

Reference Three

Individual Name _____

Number of years knowing this person _____ Telephone _____

Please provide an accompanying resume and copies of all licences, diplomas or certificates.

Conditions of Acceptance

I affirm and certify that the information given on or attached to this application is true and correct. I understand that any falsification of statements, misrepresentation, deliberate omission or concealment of information may be considered just cause for immediate disqualification from the hiring process, or dismissal from the department.

I authorize the Town of South Bruce Peninsula and/or the South Bruce Peninsula Fire Department to contact my references or previous employers as indicated.

Return application and any attached documents to:

Tim Wilson
Manager of Emergency Services / Fire Chief
South Bruce Peninsula Fire Department
315 George Street
Warton ON N0H 2T0
fireservice@southbrucepeninsula.com

Signature of Applicant

Date

Personal information is collected under the authority of the Municipal Freedom of Information and Privacy Act and will be used for candidate selection purposes only. This application form complies with the Ontario Human Rights Code.