



WABASH TOWNSHIP FIRE DEPARTMENT

2899 KLONDIKE ROAD ~ WEST LAFAYETTE, IN 47906

PHONE: (765) 463-6664 FAX: (765) 463-6665

VOLUNTEER FIREFIGHTER / EMT APPLICATION INFORMATION

MINIMUM VOLUNTEER QUALIFICATIONS

Some of the basic qualifications and selection procedures consist of, but are not limited to the following:

1. Applicants shall live or work within Wabash Township.
2. Applicants must be at least 18 years of age.
3. Applicants must be a high school graduate or equivalent.
4. Must hold a valid Driver's License.
5. Applicants shall have adequate means of personal transportation.
6. Applicant must be able to pass a criminal background investigation.
7. A felony conviction will disqualify the applicant.
8. A dishonorable discharge from the military will disqualify the applicant.
9. Applicant must be willing to submit to drug and alcohol testing.

All applicants are required to assist and fully cooperate in obtaining past employment records or personal history information.

Completeness and truthfulness on the application is essential. It is better to admit to perceived faults on the application than to omit the information. Do not omit information because of a lack of space for a response on the application form. If more space is needed to explain special circumstances, use a separate sheet of paper, note the corresponding question number and describe the incident, circumstances and the outcome in as much details as is needed. Applications that are incomplete may not be reviewed.

Your ability to follow instructions will be assessed in part by the application packet you submit. Applicants will be evaluated on a variety of skills and traits throughout the selection process including honesty, integrity, communication skills, education, adaptability, common sense, work ethic and special skills among others.

APPLICATION AND APPOINTMENT PROCESS

1. Complete and Submit Application

Incomplete applications, or applications not completed in accordance with directions may be disqualified without notification. All applications are considered final once submitted to the Wabash Township Fire Department. Applications will not be returned to make any changes after submission. The submission of an application does not guarantee an interview, acceptance as a probationary member, or full membership to the Wabash Township Fire Department.

2. Interview with Membership Committee

Applicants whose applications are accepted will be contacted for an interview with the WTFD Membership Committee. The committee will evaluate and score each applicant. The top applicants will then move forward in the application process. Those applicants not selected will be notified by email that they will not be moving forward in the application process. It is the policy of WTFD not to comment on, or provide any information regarding the reason for dismissed applications.

3. Submission of Personal Records

Applicants will be contacted to provide the following documentation. Do not submit personal records until requested.

- Copy of High School Diploma, GED, or Advanced Degree Diploma
- Copy of Driver's License
- Indiana BMV Driver Record
- Indiana State Police Background Check
- Military Discharge Documents (e.g., DD214), if applicable

4. Review of References and Employment History

Applicant references and employment history will be reviewed and contacted.

5. Scoring of Application

The Wabash Township Fire Department Membership Committee will review and score each application.

6. Offer of Probationary Membership

The Wabash Township Fire Department will contact the applicants in the order of the approved membership list to make an offer of probationary membership.

APPLICATION COMPLETION AND SUBMISSION

Do not leave blanks on the application. If an answer does not apply, insert "N/A" or "None". All sections contained within this application must be thoroughly completed. Please staple the application pages together in the upper left corner.

If you have difficulty providing the requested information or have questions, please contact:
membership@wabashtownship79.in.gov

PLEASE MAIL OR DELIVER YOUR COMPLETED APPLICATION PACKET TO:

Wabash Township Fire Department
Station 1
2899 Klondike Road
West Lafayette, IN. 47906

WABASH TOWNSHIP FIRE DEPARTMENT VOLUNTEER FIREFIGHTER/EMS JOB DESCRIPTION

To perform this position successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed in this document are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Incumbent responds to the needs of the community to best serve in the mitigation and prevention of problems such as but not limited to rescue, firefighting, and emergency medical needs. Incumbent is required to participate in training, perform maintenance of departmental equipment, and perform janitorial needs. Incumbent may be required to work out of classification and perform other functions as needed.

DUTIES

Responds to all emergencies and alarms as assigned such as fire fighting, vehicle extrication, elevator rescue, hazardous material situation, water rescue, ice rescue, trench rescue, building collapse, rope rescue, high rise rope rescue, industrial accidents, and may not be limited to the above. Performs duties such as basic life support, defibrillation, assist the medic unit, childbirth, CPR. Sets up fire scene, such as connect hoses, carry equipment, raise ladders, etc. Maintain communication with department and with supervisor, co-workers, and other emergency personnel. Be able to follow instructions as required or directed by the incident commander or through the chain of command.

Assist in general vehicle and facilities maintenance including but not limited to checking fluids, batteries, fuel levels, and operational status. Assist in general cleanliness including apparatus, equipment, and engine house such as mowing, trimming, snow removal, spreading salt on walkways, planting, fertilizing and watering grass and plants.

Attend and participate in training activities and meetings. Study essential guides, books, maps, reference materials, standard operating procedures, etc. Attends and participates in meetings. Successfully completed all required departmental training programs.

SKILLS AND KNOWLEDGE

High School education or equivalent required.

Ability to operate office equipment, effectively communicate, both verbally and in writing, with supervisor, co-workers, persons having contact with Incumbent in the performance of their duties. Develop and maintain productive work relationships with co-workers, other organizations, and the general public. Must be able to live by and set positive standards for themselves and others. Utilize resources and reference materials, efficiently organize department materials and equipment, follow oral and written instructions, and perform duties in emergency and stress-related conditions. Must physically perform duties such as climb ladders, use firefighting equipment, make a forcible entry, perform duties for long periods of time, and legally operate department vehicles.

Working knowledge of laws, regulations, statutes, codes and reporting requirements relating to and governing the department policies, practices, guidelines, and methods.

Specialized knowledge of emergency scene management, job related knowledge of area serviced such as street locations, water supply locations, etc.

Work consists of responding to stressful/dangerous situations and cleaning up afterwards, and is physically and mentally demanding. Incumbent must exercise acquired skills and training in performing duties.

Possession of a valid driver's license and demonstrate safe driving record. Must follow correct security procedures for both computer and printed records.

RESPONSIBILITIES

Required to be/become Indiana certified Firefighter I/II, Emergency Medical Technician (EMT) or Emergency Medical Responder (EMR), and Hazardous Materials Operations Level. A high degree of care and skill are required to protect tools and equipment and prevent injury to self and others. Incumbent usually works with a partner and is responsible for co-workers safety. Incumbent is responsible to keep them self physically fit/healthy in order to perform their duties. Incumbent must be able to maintain a healthy, positive attitude.

PERSONAL WORK RELATIONSHIPS

During the normal course of performing duties, Incumbent has contact-with supervisor, co-workers, other fire departments, emergency service personnel, and the general public.

PHYSICAL EFFORT

Incumbent must have required vision, hearing, physical strength and stamina. Incumbent must be able to perform duties while sitting walking, standing, crouching or stooping, and kneeling or crawling. Incumbent is required to fight fires in full protective gear, and have the physical strength required to perform duties for long hours in emergency situations.

WORKING CONDITIONS

Incumbent performs duties inside and outdoors. Incumbent must be aware of personal safety and safety of others. Incumbent is required to wear the following protective clothing or gear to perform routine duties: bunker pants, coat, and boots, and gloves, helmet with eye shield, nomex hood, and self-contained breathing apparatus. Incumbent has Standard Operating Procedures to go by when responding to alarms, wears protective gear, and follows officer's directions. Incumbent may be exposed to toxic gases, extreme heat, unstable roofs and buildings, weather conditions, mechanical, electrical, chemical hazards, and smoke.

ENVIRONMENT FACTORS THAT AFFECT JOB FUNCTIONS

The essential job functions for a firefighter are performed in and affected by the following environmental factors: A firefighter must:

- 1) Operate both as a member of a team and independently at incidents of uncertain duration.
- 2) Spend extensive time outside exposed to the elements.
- 3) Experience frequent transition from hot to cold and from humid to dry atmospheres.
- 4) Tolerate extreme fluctuations in temperature and perform physically demanding work in hot, humid atmospheres while wearing equipment that significantly impairs body-cooling mechanisms.
- 5) Work in wet, icy or muddy conditions.
- 6) Perform a variety of tasks on slippery, hazardous surfaces such as on rooftops or from ladders.
- 7) Work in areas where sustaining traumatic or thermal injury is possible.
- 8) Face exposure to carcinogenic dusts, such as asbestos and toxic substances, such as hydrogen cyanide, Acids, carbon monoxide, or organic solvents either through inhalation or skin contact.
- 9) Face exposure to infectious agents such as hepatitis B or HIV.
- 10) Perform complex tasks during life threatening emergencies.
- 11) Work for long periods of time, requiring sustained physical activity and intense concentration.
- 12) Face life or death decisions during emergency conditions.
- 13) Tolerate exposure to grotesque sights and smells associated with major trauma and burn victims.
- 14) Make rapid transitions from rest to near maximum exertion without warm-up periods.
- 15) Operate in environments of high noise, poor visibility, limited mobility, at heights, and in enclosed or confined spaces.
- 16) Use manual or power tools in the performance of duties.
- 17) Rely on senses of sight, hearing, smell and touch to help determine the nature of the emergency, maintain personal safety, and make critical decisions in confused, chaotic and potentially life-threatening environments.
- 18) Wear personal protective equipment that weighs approximately fifty (50) pounds while performing the essential functions of their job.
- 19) Perform physically demanding work while wearing positive pressure breathing equipment.
- 20) Communicate with people effectively.

PROBATIONARY TRAINING PRACTICES

All probationary members will be evaluated over a one (1) year probationary period before determining full membership.

All probationary members must, within the first two (2) years, successfully complete Indiana certified Firefighter I/II, Hazardous Materials Operations Level, Emergency Medical Technician (EMT) or Emergency Medical Responder (EMR) and demonstrate proficiency in patient care.

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2899 KLONDIKE ROAD ~ WEST LAFAYETTE, IN 47906

PHONE: (765) 463-6664 FAX: (765) 463-6665

VOLUNTEER FIREFIGHTER / EMT

Application must be typed or printed neatly in black or blue ink.

1. PERSONAL HISTORY			
Name in Full (Last, First, Middle)			
Your Current Address (Street and number, City, State and Zip Code)			
Current Phone Numbers			
Home:	Cell Phone:	Work:	
Email:			
All Other Names You Have Used (Aliases, nicknames, birth or maiden names, other name changes)			
Date and Place of Birth			
Date:	City:	County:	State:
Are you a United States Citizen? (If Naturalized, submit copy of Naturalization Certificate)			
<input type="checkbox"/> YES <input type="checkbox"/> NO			
Social Security Number:			
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed			

2. FAMILY MEMBERS			
List all family members in the following order: Spouse, children (including step-children), parents, guardians, and any other relative with whom a close relationship exists.			
Name	Relationship	Address	Home Phone #

3. Character References

List five (5) character references. Do not include relatives, former employers, or persons living outside the United States. List only character references that have a definite knowledge of your qualifications and fitness for the position for which you are applying.

Name	Years Known	Address	Phone #

4. Residence(s)

List chronologically (mm/yy) all your residences in the last **FIVE** years

From	To	Address (number, Street, City, State and Zip)

5. Employment History

Beginning with your current or most recent job, list your work history for the past **FIVE** years. (Include part-time and temporary)

Name and Address of Employer:	
Dates worked: From (mm/yy):	To (mm/yy):
Job or position Title:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal
Phone Number:	
Description of Duties:	
Name of Supervisor and Phone Number:	
Name of one or two Co-Workers and phone numbers (if known):	
Reason For Leaving:	

5. Employment History (cont.)

Name and Address of Employer:

Dates worked: From (mm/yy):

To (mm/yy):

Job or position Title:

Full Time Part Time Seasonal

Phone Number:

Description of Duties:

Name of Supervisor and Phone Number:

Name of one or two Co-Workers and phone numbers (if known):

Reason For Leaving:

Name and Address of Employer:

Dates worked: From (mm/yy):

To (mm/yy):

Job or position Title:

Full Time Part Time Seasonal

Phone Number:

Description of Duties:

Name of Supervisor and Phone Number:

Name of one or two Co-Workers and phone numbers (if known):

Reason For Leaving:

Name and Address of Employer:

Dates worked: From (mm/yy):

To (mm/yy):

Job or position Title:

Full Time Part Time Seasonal

Phone Number:

Description of Duties:

Name of Supervisor and Phone Number:

Name of one or two Co-Workers and phone numbers (if known):

Reason For Leaving:

6. Employment Record

Have you ever been involuntarily terminated from a full or part-time job, whether it was termed fired, terminated, suspended, laid-off or furloughed? Yes No (If yes, describe the circumstances.)

Have you ever resigned (quit) after being informed that your employer intended to discharge you? Yes No (If yes, explain the circumstances.)

Have you ever had any disciplinary actions taken against you at any of your jobs (written reprimands, suspension with or without pay, forfeiture of benefits or other similar actions)? Yes No (If yes list job and explain the circumstances.)

Do you have any reason to believe that a former employer may give you a negative job reference? Yes No (If yes, name of employer and why.)

WTFD prohibits harassment and discrimination. Have you ever been accused of harassment and/or discrimination in any prior employment, volunteer, or otherwise? Yes No (If yes, explain the position and circumstances.)

7. FIRE SERVICE HISTORY

Are you currently with another fire department? Yes No

Paid Department Combination Paid/Volunteer Volunteer Department

(Volunteers must submit proof from department and time of service in order to receive community service credit)

Please list: name of department, address, phone number and current Chief's name.

Have you ever applied to Wabash Township Fire Department before? Yes No

Please list your Indiana PSID if applicable.

Please list any current Fire/EMS (or otherwise relevant) certifications and their expiration date.

8. Education History

List chronologically all schools you have attended. Include High Schools, College, Trade School, Vocational School and other.

Dates Attended	School Name	Address	Date Graduated

9. Education

List Major and Minor college courses of study and any other special training class you have taken or certifications you now hold. (submit any certificates for certifications to get credit on application scoring)

Do you speak any languages other than English? Yes No
(If yes, please list language and degree of proficiency.)

Please list any additional skills you possess that may be relevant (e.g., electrical, plumbing, mechanical, carpentry, etc.).

10. Military Service (if applicable)	
Your Selective Service Number:	Branch of Service:
Highest Rank Held:	Serial Number:
Dates of Active Duty - From (mm/yy):	To (mm/yy)
Dates of Active Reserve Duty – From (mm/yy)	To (mm/yy):
If you are still enlisted, when will you be discharged?	
Unit(s) to which assigned to and primary duty type.	
Type of Discharge:	Are you eligible for reenlistment? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you or have you ever been a member of any United States Reserve or National Guard Unit? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Unit and Location:	
Reserve Status & Obligation (if any):	
Have you received ANY disciplinary action while in the military? (Including Article 15's, Captain's Mast, Written Reprimands, etc.) <input type="checkbox"/> Yes <input type="checkbox"/> No	
If so, describe circumstances.	
Have you ever been the defendant in a court martial? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, provide date and outcome).	

11. Information Concerning Driving Status, Record, Convictions, and Litigation

List all vehicle operators' license you now hold or have held from any state or country. (Provide type, State, Number and Expiration Date)

Have you ever received a traffic ticket? Yes No | How many in the past 5 years?

Have you ever been involved in a traffic accident as a driver? Yes No

If yes, how many of your total accidents were you judged to be at fault by the investigating officer?

Were you ever given a traffic ticket as a result of an accident? Yes No

Has your driver's license ever been suspended or revoked for any reason? Yes No

If yes, list when and for what reason was your license suspended.

Has your license ever been put on probation? Yes No

If yes, why?

Have you ever been denied automobile insurance or had your insurance revoked? Yes No

Have you ever been convicted for driving under the influence? Yes No

If yes, list the place, agency, date and details of each instance.

Have you ever been convicted of a misdemeanor? Yes No

If yes, list place, agency, date and details of each incident.

Have you ever been convicted of a felony? Yes No

If so, list place, agency, date and details of each incident.

Have you ever had a judgment entered against you as a result of a civil suit other than a divorce case? (This includes "small claims, evictions and collections" or any other kind of civil court actions even if settled out of court prior to judgment being entered by a judge or jury. Yes No

If yes, list dates location and brief facts for each case.

12. Community Service

List any community service activities you participated in during high school, college and/or are presently involved with. **Please provide and attach, where designated, proof of community service activities in order to receive community service credit** (i.e. letter stating such involvement and length of commitment.)

Organization or Activity	Dates Served

13. Essay Questions

Please briefly explain why you want to be a volunteer with Wabash Township Fire Department.

A large, stylized watermark of the word "WABASH" is centered on the page. The letters are thick and outlined in a light gray color, with a yellowish-gold fill. The font is a decorative, serif style. The watermark is positioned behind the main text area, which is a large empty box for writing an essay.

Application Acknowledgement

The job description, environment factors that affect job functions, and probationary training practices included in the WTFD application packet describes the duties and responsibility of the volunteer firefighter/EMS position as well as conditions I may face performing these duties.

I acknowledge that I have received this information, thoroughly reviewed this information, and that it is my personal responsibility for understanding the information and complying with all job duties, requirements, and responsibilities contained herein and any subsequent revisions.

Please print your Full Name

Date Signed

Applicant Signature

Is there any limitation (physical, mental, emotional, or otherwise) that would prevent you from performing the job duties and requirements as outlined in full? Yes No

Please print your Full Name

Date Signed

Applicant Signature

INFORMATION RELEASE AUTHORIZATION

By signing, I authorize the release of any academic transcripts and any disciplinary records.

I further authorize any and all of my present and past employers to release and furnish the Wabash Township Fire Department with any and all information, copies of records and data pertaining to my employment, including, but not limited to the following:

- 1) My dates of employment.
- 2) Each position I held including the length of time in each position.
- 3) A description of my job duties.
- 4) The reason for my leaving the company.
- 5) My disciplinary records, including dates and basis for any action taken against me.
- 6) My attendance record, including days absent and days tardy.
- 7) Any and all certificates of accomplishment or record of achievement.
- 8) Whether I am eligible for rehire or precluded from same.

Copies of this authorization that show my signature are as valid as the original release signed by me. I understand that misrepresentation of information is cause for rejection of my application or dismissal after appointment.

_____ Please print your Full Name _____ Social Security Number _____

_____ Date of Birth _____ Driver's License Number _____

_____ Address _____ City _____ State _____ Zip _____

_____ Applicant Signature _____ Telephone Number _____

Date Signed: _____

Witnessed by: _____

APPLICANT STATEMENT OF TRUTHFULLNESS

I certify that all information I have provided in order to apply for and secure a volunteer position with the Wabash Township Fire Department is true, complete and correct.

I understand that all the information I have provided is subject to verification and that any information found to be false, incomplete or misrepresented in any respect, will be sufficient cause to 1) terminate consideration of this application, or 2) if already appointed, I may be subject to immediate discharge from the Wabash Township Fire Department.

I have expressly authorized, without reservation, the Wabash Township Fire Department, its representatives, employees or agents to contact all references, and any other persons in order to obtain any and all information deemed necessary by them to 1) verify the accuracy of all information provided by me in this application or at other points throughout the entire process including interviews; 2) investigate my personal character and conduct. I have signed a RELEASE OF INFORMATION WAIVER FORM, which is also attached to this application.

I understand that the Wabash Township Fire Department does not unlawfully discriminate in employment and no question on this application is used for purpose of limiting or excluding any applicant from consideration on a basis prohibited by applicable local, state or federal law.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

Printed Name of Applicant

Signature of Applicant

Date