



## Gravenhurst Fire Department Application Form – Part-Time/Volunteer Firefighter (Please Print)

Please note that all applicants will be required to provide a clear police background check (vulnerable persons) AND have a medical practitioner complete a “Pre-Employment Medical Screening” indicating you are fit to perform the duties associated with being a firefighter prior to commencing employment. The necessary forms will be provided if/when placement is offered.

Personal Information Confidential when completed		
<b>Last Name</b>	<b>Given Name</b>	<b>Initial</b>
<b>Address</b>		
<b>Telephone</b>	<b>Cell Phone</b>	<b>Business</b>
<b>Emergency Contact</b>		<b>Emergency Contact Telephone</b>
<b>Fire Station closest to your residence:</b> (please underline and indicate approximate distance to station)		
<b>Station 1 (Gravenhurst – town centre)</b>	<b>Station 2 (Kilworthy)</b>	<b>Station 3 (Ryde)</b>
Volunteer Eligibility Requirements		
What hours would you be available? <input type="checkbox"/> Weekdays _____ <input type="checkbox"/> Weekends _____ <input type="checkbox"/> Weeknights _____ <input type="checkbox"/> Other? _____	Are you legally eligible to work in Canada? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you meet Eligibility Requirements? <input type="checkbox"/> Yes <input type="checkbox"/> No  <small>(min. 18 years of age, lives within Town of Gravenhurst, Valid Driver’s License)</small>
Are you able to understand oral and written English? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you able to understand oral and written French? <input type="checkbox"/> Yes <input type="checkbox"/> No	Other Languages? Describe:
Have you ever been convicted of a criminal offence for which you have not received a pardon? <input type="checkbox"/> Yes <input type="checkbox"/> No   Describe:		

## Employment and Volunteer Experience

<b>Present Employer:</b> Name: Address: Telephone: May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Position: How long have you been employed there? Duties: Will your employer permit you to leave work to attend emergencies in Gravenhurst? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Previous Employer:</b> Name: Address: Telephone: May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Position: How long were you employed there? Duties:
<b>Previous Employer:</b> Name: Address: Telephone: May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Position: How long were you employed there? Duties:
<b>Present Volunteer Organization:</b> Name: Address: Telephone: May we contact this organization? <input type="checkbox"/> Yes <input type="checkbox"/> No	Position: How long have you volunteered there? Duties:
<b>Previous Volunteer Organization:</b> Name: Address: Telephone: May we contact this organization? <input type="checkbox"/> Yes <input type="checkbox"/> No	Position: How long did you volunteered there? Duties:

## Related Skills or Experience

Previous firefighting or emergency response experience?

Yes    No   Describe:

Previous military or police experience?

Yes    No   Describe:

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.

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 or scuba diving	1	2	3	
Building construction or design	1	2	3	
Blueprint reading	1	2	3	
Fire fighting tasks	1	2	3	
Rescue procedures	1	2	3	
Athletic sports or skills	1	2	3	

Languages	<b>1</b>	<b>2</b>	<b>3</b>	
Occupational health and safety	<b>1</b>	<b>2</b>	<b>3</b>	
Photography	<b>1</b>	<b>2</b>	<b>3</b>	
Fundraising	<b>1</b>	<b>2</b>	<b>3</b>	
Office equipment	<b>1</b>	<b>2</b>	<b>3</b>	
Typing, filing or telephones	<b>1</b>	<b>2</b>	<b>3</b>	
Public speaking	<b>1</b>	<b>2</b>	<b>3</b>	
Teaching, facilitation or coaching	<b>1</b>	<b>2</b>	<b>3</b>	
Events coordination	<b>1</b>	<b>2</b>	<b>3</b>	
Radio communication	<b>1</b>	<b>2</b>	<b>3</b>	
Medical or health sciences	<b>1</b>	<b>2</b>	<b>3</b>	
Professional driver	<b>1</b>	<b>2</b>	<b>3</b>	
Heavy equipment operation	<b>1</b>	<b>2</b>	<b>3</b>	
<b>Other Licences and Certificates</b>				
CPR				Expiry Date:
First Aid				Expiry Date:
Defibrillation				Expiry Date:
Ontario Driver's Licence Class <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> Z <input type="checkbox"/> F <input type="checkbox"/> G				Expiry Date:
Other - Description				Date
Other - Description				Date

## Education Background

Elementary School Name:

Highest grade/level completed

Secondary School Name:

Highest grade/level completed

Post-Secondary Education:

Major or Specialization:

Level or Degree Achieved

Post-Secondary Education:

Major or Specialization:

Level or Degree Achieved

Other:

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 dismissal.

I authorize the Gravenhurst Fire Department to contact my references, previous employers or volunteer organizations as indicated and to obtain and review my medical assessment if/when a placement is offered.

\_\_\_\_\_  
**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*.