

Volunteer Firefighter Application

City of Belleville Fire Department
6 Main Street
Belleville, Mi. 48111
734.697.9323

We welcome you as an applicant to be a volunteer firefighter. Your application will be kept on file and considered with others for the position of Volunteer Firefighter for a period of one year following the date of application. The City of Belleville and The City of Belleville Fire Department tries to hire and retain the best qualified personnel for this position and are committed to the policy that all persons have equal access to its programs, services, activities, facilities and employment without regard to race, color, creed, religion, national origin, sex, disability, age, marital status, sexual orientation or status with regard to public assistance.

The Fire Department tries to learn as much about the applicant and his/her qualifications and expects the applicant to be candid and responsible during this hiring process. The Fire Department will rely on the statements, representations and information you provide or submit to us. Please furnish us with complete information. An incomplete application may reduce your opportunity with The City of Belleville Fire Department. You are encouraged to attach any additional information which you believe qualifies you for the position. Materials submitted in support of an application are normally not returned. You should not submit an original document if it is your only copy.

If the applicant is hired, he/she will serve a probationary period of 6 months, which may be extended if deemed appropriate by the Fire Chief. This period is actually part of the testing process and is the employee's opportunity to demonstrate that they can learn and perform their duties to the satisfaction of the Fire Department. If the employee does not perform satisfactorily, the probation period may be extended or the employee may be terminated without right to appeal.

PERSONAL INFORMATION – PLEASE PRINT IN INK

NAME: _____
Last First Middle

ADDRESS: _____
Street City State Zip

TELEPHONE/EMAIL: _____
Home Cell Email

IF LESS THEN TWO (2) YEARS AT ABOVE ADDRESS, PLEASE COMPLETE THE FOLLOWING:

PRIOR ADDRESS: _____
Street City State Zip

Length of time at this address _____

Best time to reach you: _____

NEW VOLUNTEER: _____ RETURNING VOLUNTEER: _____

IF RETURNING, WHEN WAS THE LAST DATE SERVED: _____

List any name(s), other than that which appears on this application that others may know you as:

	Yes	No
Are you able to meet the attendance requirements (training) of this position?	_____	_____
Can you fluently Speak, Read and Write the English Language?	_____	_____
Do you have or have had an alcohol or drug abuse problem? Please Explain Below.	_____	_____

EMPLOYMENT HISTORY:

Please give accurate, complete employment information. List your present or most recent experience first **EVEN IF YOU ATTACHED A RESUME. YOU MUST COMPLETE THIS SECTION.**

EMPLOYER NAME: _____ LENGTH OF EMPLOYMENT

Address of Employer: _____ From: _____
Month Year

Phone #: _____ Supervisor #: _____ To: _____
Month Year

Your Title: _____ Supervisor Title: _____ Hours per wk: _____

Major Responsibilities': (be Complete) _____

Reason for Leaving: _____

EMPLOYER NAME: _____ LENGTH OF EMPLOYMENT
Address of Employer: _____ From: _____
Month Year
Phone #: _____ Supervisor #: _____ To: _____
Month Year
Your Title: _____ Supervisor Title: _____ Hours per wk: _____
Major Responsibilities': (be Complete) _____

Reason for Leaving: _____

EMPLOYER NAME: _____ LENGTH OF EMPLOYMENT
Address of Employer: _____ From: _____
Month Year
Phone #: _____ Supervisor #: _____ To: _____
Month Year
Your Title: _____ Supervisor Title: _____ Hours per wk: _____
Major Responsibilities': (be Complete) _____

Reason for Leaving: _____

EMPLOYER NAME: _____ LENGTH OF EMPLOYMENT
Address of Employer: _____ From: _____
Month Year
Phone #: _____ Supervisor #: _____ To: _____
Month Year
Your Title: _____ Supervisor Title: _____ Hours per wk: _____
Major Responsibilities': (be Complete) _____

Reason for Leaving: _____

Were you ever subject to DISCIPLINARY ACTION in connection with any employment?

Yes: _____ No: _____ If Yes please give reason below:

EDUCATIONAL INFORMATION:

Highest Grade Completed (K-12): _____ Graduate or GED? _____

Name of High School: _____

Did you attend college? _____ Highest level Completed? _____

Name of school: _____ Course of Study: _____
(College, University, technical, Vocational, Business)

Address: _____ Graduate? Yes or No (please circle one)

Degree Earned: _____

Name of school: _____ Course of Study: _____
(College, University, technical, Vocational, Business)

Address: _____ Graduate? Yes or No (please circle one)

Degree Earned: _____

Name of school: _____ Course of Study: _____
(College, University, technical, Vocational, Business)

Address: _____ Graduate? Yes or No (please circle one)

Degree Earned: _____

Talents/Hobbies: ___ Carpentry ___ Photography ___ Computer ___ Teaching

___ Foreign Language (please list) _____

NAME: _____ ADDRESS: _____

PHONE: _____

CONVICTION INFORMATION:

The existence of a criminal conviction record will not automatically disqualify you, though certain types of criminal convictions may prohibit you from working in certain positions. Before any applicant is rejected on the basis of a criminal conviction; he/she will be notified in writing and will be given any rights to processing complaints or grievances afforded by Michigan Statutes.

Have you ever been arrested, detained or taken into custody in this state, in any other state, with the Military or elsewhere, or were you ever investigated by a law enforcement or government agency?

YES: _____ NO: _____

If yes, how many times? _____ If Yes please give details on a separate sheet and attach.

Have you ever been convicted of a misdemeanor, a felony or other violation of law that has not been annulled, expunged, set aside, purged, sealed or dismissed?

Yes: _____ No: _____

For each conviction please give date(s) of conviction and the city, county and state where convicted below.

Convicted of: _____ in the City of: _____

County of _____ State of _____

Date of Conviction: _____

Convicted of _____ in the City of _____

County of _____ State of _____

Conviction Date: _____

DRIVING RECORD:

Number of Traffic Tickets (excluding parking tickets) you have received in the last Five (5) years _____

Reason: _____ City: _____

Reason: _____ City: _____

Reason: _____ City: _____

Reason: _____ City: _____

Have you ever had a Driving Violation, DUI or DWI? Yes: _____ No: _____

If Yes, date of incident _____ City/County of Occurrence _____

Has your driver's license ever been suspended or revoked? Yes _____ No _____

Have you ever been involved in an accident? Yes _____ No _____

Were you judged at fault in any accident? Yes _____ No _____

DRIVING RECORD CRITERIA

You will be disqualified if you have any of the following issues related to your driving record:

- Five (5) or more points on your driving record
- Any current Suspensions
- Two (2) or more prior suspensions
- Driving convictions related to alcohol or narcotics substances
- Occurrences of Careless or reckless Driving
- Multiple (2 or more) failures to appear in court
- Any Outstanding Warrants for your arrest
- Cited for Unsatisfactory driving record (UDR) unless record has been clear for the past three (3) years

Individual Driving Records may be evaluated on a Case- by – Case Basis in situation where the driving record has been clear the past three (3) years yet poor in early driving history.

STATEMENT OF VERACITY

Review your application carefully and read through the statements below before signing:

In consideration for my employment, I agree to conform to The City of Belleville Fire Department policies, practices, rules/regulations, and SOG's, which may be changed from time to time. I further agree that my employment and the terms and benefits, provided to me is not intended to and does not constitute any contractual relationship, is for no definite period of time and is terminable by myself or The City of Belleville Fire Department with or without cause. No oral statements or representations made either before or during the employment can change or modify this non-contract actual and at-will relationship.

In further consideration for my employment, I understand and agree that there are other forms, statements and provisions that have to be completed and agreed to, and those forms, statements and provisions are part of this applications and will be included within my employment records.

I represent and warrant the answers I have given are complete and true to the best of my knowledge and belief.

I further acknowledge that I have read and understood the questions regarding criminal records and my background, and that I have answered these questions completely and truthfully.

I understand the failure to answer all questions completely and truthfully will subject me to dismissal from The City of Belleville Fire Department.

Applicants Signature: _____ Date: _____

Should you have any questions concerning this application, please call The City of Belleville Fire Department, Chief Loranger at 734-697-9323, Monday Thru Friday between the hours of 9:00 Am and 4:00 PM.

Authority To Investigate Personal Information

I hereby authorize The City of Belleville Fire Department, Belleville, Michigan, to conduct an investigation into my background including criminal history, driving record, previous employment, education background, medical history and to conduct any other investigation that it deems appropriate.

I request any custodian of the aforementioned information including duly constituted law enforcement agencies or judicial officer or other appropriate persons to furnish to The City of Belleville Fire Department with all information it may have pertaining to me. I hereby release The City of Belleville Fire Department, The City of Belleville, such custodians and any law enforcement agency, judicial officer or any other individual from any liability arising from the disclosure of any information pertaining to me which is obtained during said investigation.

Full Name (please print)

Address: Number and street

City, State and Zip

Date of Birth

I hereby give permission for the release of any and all information as may be deemed necessary by The City of Belleville Fire Department and The City of Belleville.

Full Name (Please Print)

Signature

Witness Signature

Date _____

Date _____

STATEMENT OF UNDERSTANDING

1. I understand that my employment does not constitute any contractual relationship and is terminable at any time by myself or The City of Belleville Fire Department or The City of Belleville for any reason or without reason. I further understand that no representation made either before or during my employment can change or modify this non-contractual policy.
2. The City of Belleville Fire Department utilizes basic common sense rules, standards, guidelines and practices in its day-to-day work requirements and employment. Only some of these rules, standards, guidelines and practices are in written form. However, both the written and unwritten standards of employment and job performance are in effect. The rules, standards, guidelines and practices (often referred to as “policies”) may be amended or rescinded from time to time at the discretion of The City of Belleville Fire Department. These “policies” are not intended to and do not constitute any contractual relationship.
3. The City of Belleville Fire Department property and The City of Belleville Fire Department premises include lockers, closets, or other receptacles for storing personal property. The City of Belleville Fire Department reserves the right to inspect or search lockers, etc, in the event grounds exist for such inspection or search, or on a random basis. The grounds may include questions, suspicions, or investigations of theft or missing property (The City of Belleville Fire Department or otherwise), possession of alcoholic beverages or illicit drugs, and/or possession of dangerous weapons. I understand and agree that I am subject to the possibility of searches or inspections of my personal effects, purse, etc, in the event it is deemed necessary by The City of Belleville Fire Department. Periodic notices of random inspections may be given.
4. Drug/Alcohol Testing. In order to assure a drug free work environment, the District prohibits the use, sale, transfer, being under the influence and/or reporting to work after ingesting illicit drugs. Under The City of Belleville Fire Department policy, alcohol is included within the meaning and prohibition of drugs. One way to maintain a drug free workplace is to test applicants and employees; and therefore, successful passage of a drug test will be a condition of employment and/or continued employment. I also agree to submit to alcohol and/or drug screening tests, if requested of me, at any time prior to, or during my employment, including but not limited to urinalysis testing, blood testing, random or announced testing, with or without reasonable suspicion.
5. Sexual Harassment. Sexual Harassment is defined as any unwelcome sexual advances, requests for sexual favors, or other verbal conduct of a sexual nature when (1) submission of such conduct is made a job requirement or causes changes in working terms or conditions, and/or (2) it has the effect and purpose of unreasonably interfering with work performance or creating an intimidating, hostile, or offensive workplace. Sexual harassment WILL NOT be tolerated and will be grounds for immediate termination.

I have read this statements and fully understand and agree with it.

Name (Please Print)

Applicant Signature

Date _____