



RUSTON FIRE DEPARTMENT
Volunteer Firefighter Application
5117 N. WINNIFRED STREET
RUSTON, WA. 98407
(253) 759-3544
(253) 752-7693 fax

Personal History of: _____
(Last Name) (First Name) (Middle Name)

Applicant for the Position of: FIREFIGHTER / EMT

The **applicant** must print the answers to questions contained in this questionnaire in black ink. The questionnaire is **required to be filled out** and must be **fully completed**. To avoid any omissions, if a line or section does not apply, **it is required to write N/A in the space provided** for us to know that you saw the question. If you need more space than what is available under the question, please use a separate sheet or sheets and attach them at the end of the packet. Please put the question number on the additional

sheet(s). If you do not understand a question, or you are not sure of its scope, you will have the opportunity to explain any circumstances to the background investigator.

INSTRUCTIONS:

You have applied for a position with the City of Ruston Fire Department. Because of the sensitive nature of this position, it is necessary to conduct a review of your background and personal history to determine your suitability for a firefighter/EMT position with the department.

On the following pages you will be asked a series of questions, most of which are about your past. Each of us has something in our past we would prefer other people not know. In some cases, these past events may disqualify a candidate from the maintaining a volunteer position. In most cases, **they won't**. It is sometimes uncomfortable to discuss certain things in our background, but our department is not looking for perfect people, just honest ones. Any **intentional** dishonesty or minimization in any part of the hiring process will result in immediate removal from the process.

All Fire Department agencies have different employment standards. For you to be successful in our hiring process you must be completely truthful in all of your answers to these questions and **let us evaluate your answers, in light of our standards.**

In some of these questions, you will hear the word "ever" being used. "**Ever**" refers to anytime in your life, and is not limited to the last three, five or even ten years. **If you answer "Yes" to any question, please provide a detailed explanation (to include who, what, where, when, why and how).**

The contents of this questionnaire will be considered **confidential** and will be used for investigating employment suitability with the Ruston Fire Department and also may be used to verify information post employment. Additionally, if another Fire agency is in possession of a notarized permission waiver signed by you, they will be authorized to view your file. Your truthfulness in answering these questions may be verified by the use of a polygraph.

There is one exception to the confidentiality of your background investigation. Should it be discovered that you are currently involved in criminal activity, or have committed an undiscovered felony, the Fire agency having jurisdiction WILL BE NOTIFIED.

I CERTIFY THAT I HAVE READ THE DISCLAIMER ABOVE AND WILL ANSWER ALL QUESTIONS IN A TRUTHFUL AND HONEST MANNER. I FURTHER STATE THAT I UNDERSTAND THAT ANY DECEPTION ON MY PART IN ANSWERING THESE QUESTIONS WILL RESULT IN A RECOMMENDATION BY THE BACKGROUND INVESTIGATOR TO REMOVE ME FROM THIS HIRING PROCESS.

SIGNATURE: _____ DATE: _____

Do not sign below until the time of your interview with the Investigating Officer for the Ruston Fire Department.

The previous statement was verbally read to me. I was given the opportunity to ask questions and have them thoroughly explained to me.

_____/_____/_____
Signature of Applicant Signature of Interviewer Date

REQUIRED DOCUMENTS

Attach **ORIGINALS, unless otherwise stated**, of the following documents to this questionnaire. Failure to submit these documents in a timely manner will delay your consideration for employment. Some of these documents may not be applicable to you. Copies of the documents are acceptable. We will make a copy for you if you don't have access to a copy machine.

- Driver's License

- Certified birth certificate or Social Security Card. Passport is suitable.
- Name change documents. Copy is okay.
- Driving Record from Department of Licensing. (Original from D.O.L.) Driving records must be provided from each state you have held a license. (WA DOL is closed Mondays)

We may also ask for (wait until instructed):

- High school diploma **OR** GED certificate. (Transcripts will be accepted as an alternative to the diploma or GED certificate.)
- Transcripts from colleges or universities. (Original **MUST** be received by us in an **officially sealed envelope from the school**) Each school you attended is required, regardless of credits.
- Military discharge papers. (**MUST** include discharge status)
- The Ruston Fire Department will run a criminal background check and driver's history (per state you've received a driver's license for)

PERSONAL INFORMATION

The following information is required of you for verification and contact purposes:

1. Your Name (please print in ink)

LAST FIRST MIDDLE

List other names you have used or been known by. Include maiden names, married or adopted names, or nicknames.

(Other names): _____

2. List the physical address of the residence where you live:

Number Street City State Zip Code

List your mailing address **if different** than your physical address:

Number Street City State Zip Code

3. List telephone number(s) at which you can be contacted and the hours when you will be available at these numbers:

(Home) _____

(Work) _____ Hours _____

(Pager or cell phone) _____

(Email address) _____

(Face book, Twitter, Slack, etc. addresses) _____

4. Date of birth: _____ (____/____/____)
Month Day Year MM DD YYYY

5. Place of birth (City and State or Country): _____
U.S. citizenship is required for this position. Proof is required showing that you are a legal resident of this country.
6. Social Security Number: _____. **In accordance with the Federal Privacy Act of 1974, disclosure is voluntary.** This information will be used for identification purposes to ensure that proper records are obtained.

RESIDENCE RECORD

Start with your **present** address and working back; list each address at which you have resided since you left high school:

Also include all properties you have owned, regardless of residency. Try your best to provide city if address is unavailable

PLEASE LIST THE ADDRESS, APARTMENT COMPLEX NAME AND LANDLORD/RENTAL CO. INFORMATION

STREET & Apartment complex name	CITY, STATE	ZIP	FROM	TO	OWN/RENT?

List **ALL** that apply: 1-Spouse, 2-Parents, 3- Guardians, 4-Step-parents, 5-Foster parents, 6-Parents-in-law, 7-Brothers, 8-Sisters, 9-boyfriend, girlfriend, fiancée, and significant other , **10-former boyfriend, former girlfriend, former fiancée, former spouse, or former significant other**, 11-Current roommates 12 Former roommates (Indicate relationship by number in square.)

EMERGENCY CALL DOWN LIST, TO INCLUDE EMAIL ADDRESSES

#	Name	Street Address	City	State	Zip Code	Phone	Email address

PERSONAL REFERENCES

List at least five (4) adult references you have known for at least three years (preferably the past 3 years). It is very important that you list the best phone number for all references. You may need a list of alternative references that can be supplied to your investigator in the event some of the references cannot be contacted.

Name	Address	Phone	Email address	Yrs Known

EXPERIENCE AND EMPLOYMENT:

Beginning with your most current employment, list all jobs you have held. For purposes of the Personal History Statement, part-time, temporary, and voluntary work should be included. Please list all periods of unemployment in chronological sequences in the spaces provided for you.

Should you need to list additional information, please use an additional sheet and continue in the EXACT format below.

NAME & ADDRESS OF EMPLOYER:		
Telephone:		
Dates of employment: From:		To:
Full-time _____	Part-time _____	Voluntary _____
Military _____		
Responsibilities and/or duties:		
Name you were known by:		
Name of supervisor:		email:
Name of co-workers: 1)		email:
2)		email:
3)		email:
Reason for leaving:		

UNEMPLOYED FROM _____ TO _____

NAME & ADDRESS OF EMPLOYER:		
Telephone:		
Dates of employment: From:		To:
Full-time _____	Part-time _____	Voluntary _____
Military _____		
Responsibilities and/or duties:		
Name you were known by:		
Name of supervisor:		email:
Name of co-workers: 1)		email:
2)		email:
3)		email:
Reason for leaving:		

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UNEMPLOYED FROM _____ TO _____

NAME & ADDRESS OF EMPLOYER:	
Telephone:	
Dates of employment: From: _____ To: _____	
Full-time _____ Part-time _____ Voluntary _____	
Military _____	
Responsibilities and/or duties:	
Name you were known by:	
Name of supervisor:	email:
Name of co-workers: 1)	email:
2)	email:
3)	email:
Reason for leaving:	

UNEMPLOYED FROM _____ TO _____

NAME & ADDRESS OF EMPLOYER:	
Telephone:	
Dates of employment: From: _____ To: _____	
Full-time _____ Part-time _____ Voluntary _____	
Military _____	
Responsibilities and/or duties:	
Name you were known by:	
Name of supervisor:	email:
Name of co-workers: 1)	email:
2)	email:
3)	email:
Reason for leaving:	

UNEMPLOYED FROM _____ TO _____

1. Would any problem result if your present employer was contacted during the course of the background investigation?

Yes No

2. If you have had no prior employment, please explain here:

3. Have you claimed Veteran's Preference points to obtain entry level employment more than once?

Yes No

4. Have you ever been fired or asked to resign from any place of employment?

Yes No

5. Have you ever been suspended or demoted from any place of employment?

Yes No

Explain: _____

6. Have you ever received a verbal or written disciplinary notice or reprimand?

Yes No

7. Have you ever had any problems getting along with supervisors or co-workers?

Yes No

8. Have you ever left a job without giving proper notice?

Yes No

9. What is the most serious trouble you have ever gotten into on a job?

10. Have you ever been talked to by an employer about excessive use of leave or reporting late to work?

Yes No

11. What do you think about shift work?

12. What do you think about working weekends and holidays?

13. List all items you have ever taken from a place of employment?

14. Is there anything else you wish to discuss about your employment history?

Yes No

EDUCATION

15. Do you currently have a High School Diploma or a GED?

Yes No

List all high schools you have attended, beginning with the ninth grade.

Name	Location	Dates attended	Graduated? Year?

List **all** colleges or universities you have attended, regardless of credits or degrees.

Name	Location	Dates attended	Credits	Degree/GPA

16. Have you ever applied, successfully or unsuccessfully, for a position with any Fire agency, including the Ruston Fire Department?

Yes No

If “YES”, please provide the year and agency and indicate which process you are in or were in when disqualified. Please list all agencies you applied with at Public Safety Testing as well if you have had contact with the agency.

YR	Agency	Written	PAT	Oral Board	Back-ground	Poly	Psych	Medical exam	DQ?	Hired

17. Have you ever had a background by Ruston Fire or any other agency? Yes No

If yes:

Year completed?	Agency	Investigator's name	Pass/fail? Reason (if known)

DRIVING RECORD

18. Do you have a current and valid Washington State driver's license? Yes No

19. Have you ever been issued a driver's license from any other state? Yes No

If "YES", please list state, dates and driver's license number:

STATE _____ DL# _____ DATES: _____

STATE _____ DL# _____ DATES: _____

20. List **ALL** traffic citations that you have received since the age of sixteen (16):

Nature of violation	Location (City and State)	Approximate Date	Final outcome (i.e. paid/deferred/dropped)

21. List **ALL** motor vehicle accidents in which you have been involved as a driver:

Date	City, State	Investigating agency	Injury?	At fault?	Case #

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22. Do you currently have auto insurance? Yes
 No

23. Has your driving privilege ever been revoked, suspended, or placed on probation? Yes No

24. Have you ever had any outstanding tickets? Yes No

25. Have you ever been arrested for a DUI or DWI? Yes No

26. Have you ever been involved in a hit and run, no matter how minor? Yes
 No

27. How many times have you driven while intoxicated or under the influence of any drug?
 Yes No #of times? _____ When was the last time? _____

28. Do you have any pending civil litigation? Yes No

CRIMINAL ACTIVITES:

29. If you have ever been **arrested, detained, questioned, taken into custody, been issued a Misdemeanor citation, incarcerated, or convicted** of any crime, please give the following information:

DATE	AGENCY/LOCATION	CHARGE/REASON FOR CONTACT	DISPOSITION

DOMESTIC VIOLENCE ISSUES:

30. Have you ever been involved in any type of domestic violence issues, whether you were the victim or the suspect? Yes
 No
31. Have you ever been in a physical altercation with a spouse, sibling, family member, parent, roommate, child, partner, or significant other (i.e. pushing, shoving, strangling, slapping, throwing things at, spitting at) to include acts of self-defense? Yes No
32. Have you ever caused any damage before, during, or after a domestic violence dispute? Yes
 No
33. Are there any other illegal drug, narcotic or controlled substance that you have possessed or used without a prescription?
 Yes No
34. Have you ever remained in a place where illegal drugs were being used?
 Yes No
 Yes No
 Yes No

OPTIONAL INFORMATION:

List organizations, clubs, professional societies, or other associations of which you are, or have been a member (please include the name of the group, the city and state, and your present status or position in that group.).

What are your personal hobbies? (What do you like to do during the times that your are not at work?) Please include any special skills or qualifications that might be useful in the position for which you've applied.

List the magazines and newspapers to which you currently subscribe:

List any identifying marks, scars, burns or birthmarks:

List all tattoos:

Additionally, you may attach copies of certificates, awards, or commendations you would like considered.

Please complete this page **in your own handwriting.**

QUESTIONS: Why do you want to be a Fire Fighter in the City of Ruston? How do you think it will benefit you and how will it benefit the City of Ruston to hire you?

(Limit essay answer to this page only)

Signature _____

Date _____

IF YOU HAVE PRIOR FIRE EXPERIENCE, PLEASE CONTINUE ON WITH THE QUESTIONS. ONCE AGAIN, PLEASE GIVE A DETAILED EXPLANATION FOR EACH "YES" ANSWER. IF YOU NEED MORE SPACE THAN WHAT IS AVAILABLE UNDER THE QUESTION, PLEASE ADD CONTINUATION SHEETS.

1. How many Fire agencies have employed you? _____

DEPARTMENT	STATE	DATES:

2. Have you successfully completed a state certified Basic Fire Academy? Yes No

Where: _____

When: _____

3. Have you ever failed to complete a Basic Fire Academy? Yes No

4. Are you currently on probation? Yes No

5. Have you ever been terminated, been asked to resign or failed to complete a probationary period? Yes No

6. Have you ever had your probationary period extended? Yes No

7. Have you ever resigned from any Fire agency? Yes No

8. Are you currently having personnel or supervisory problems? Yes No

9. Have you ever been the principle in any civil suits or the subject of a criminal prosecution? Yes No

10. Have you ever used any extended leave, paid or unpaid, or spent non-vacation time away from your present or prior agency? Yes No

If "YES", explain:

11. Have you ever received an unsatisfactory performance evaluation or rating? Yes No

If "YES", explain:

12. Has your current or past agency investigated any complaints of excessive force allegations lodged against you? Yes No

If "YES", please list and include departmental action for each one:

- 1) Founded
- 2) Unfounded
- 3) Not sustained

LATERAL ESSAY: Why do you want to or why did you leave your last department?

Signature_____

Date_____