

# SIUSLAW VALLEY FIRE AND RESCUE

## JOB APPLICATION



<b>1. Title of position you are applying for:</b>				DATE: <input style="width: 90%;" type="text"/>
<b>2. First Name:</b>	<b>Middle Initial:</b>	<b>Last Name:</b>		
<b>3. Street Address (City, State, Zip):</b>				
<b>4. Mailing Address (City, State, Zip) If different</b>				
<b>5. Home Phone:</b>				
<b>6. Message/Cell Phone:</b> <span style="float: right;"><b>Can you receive and send text messages Yes [ ] No [ ]</b></span>				
<b>7. Email Address:</b>				
<b>8. Oregon Driver's License-</b> Do you have a valid Oregon Driver's License? [ ] Yes [ ] No If no, is your license Revoked [ ] Suspended [ ] Restricted [ ]				
<b>No. Expires:</b> (possible military exemption may apply)				
<b>9. Employment Eligibility Verification (failure to complete this section will disqualify you from further consideration)</b>				
A. Are you a citizen of the United States? [ ] Yes [ ] No				
B. Are you an alien lawfully admitted for permanent residence? [ ] Yes [ ] No				
C. Are you an alien authorized by the Immigration or Naturalization Service to work in the United States? [ ] Yes [ ] No				
<b>Are you a Veteran?</b> [ ] Yes [ ] No <b>If Yes:</b> Dates you served? From: To: <b>Can you claim Veteran's preference?</b> [ ]				
<b>10. Education and Training:</b> Please read the minimum qualifications and education/experience section on the job announcement before continuing. Copies of transcripts, certifications, licenses, degrees, etc., must be submitted with the application as appropriate, based on the minimum qualifications of the job announcement. Official transcripts may be required upon request. Foreign transcripts must be reviewed by a credentialing service (NACES) and an official letter submitted as part of the application packet.				
High School Graduate? [ ] Yes [ ] No If no, indicate highest grade completed: Equivalency Test or GED [ ] Yes [ ] No				
Name and Location of High School:				
Name and Location of College, University, Business, Trade, or Service Schools		Degree Major	Credits Earned	Degree Type
License/Registration/Certification		Number	Issue Date	Expiration Date

**Experience:** Begin with your MOST RECENT experience, including military service and volunteer service. Give details on the experiences that you believe meets the minimum requirements for this position. List all experience in the last ten (10) years. Show actual time (number of hours per week) spent in each experience. A resume WILL NOT be accepted in lieu of completing the Siuslaw Valley Fire and Rescue application.

*The following section must be completed even if attaching a resume.*

<b>Period of Employment</b>		<b>May we contact present employer? [ ] Yes [ ] No</b>	
<b>From</b>	<b>To</b>	<b>Name of Company:</b>	<b>Phone No:</b>
__/__/__	__/__/__		
<b>Total:</b>		<b>Address:</b>	<b>City/St/Zip:</b>
___ Yr(s) ___ Mo(s)		<b>Immediate Supervisor:</b>	
<b>Hours per week</b>	<b>Reason for Leaving:</b>		
<b>Your Job Title:</b>			
<b>Your Duties:</b>			
<b>Period of Employment</b>		<b>May we contact present employer? [ ] Yes [ ] No</b>	
<b>From</b>	<b>To</b>	<b>Name of Company:</b>	<b>Phone No:</b>
__/__/__	__/__/__		
<b>Total:</b>		<b>Address:</b>	<b>City/St/Zip:</b>
___ Yr(s) ___ Mo(s)		<b>Immediate Supervisor:</b>	
<b>Hours per week</b>	<b>Reason for Leaving:</b>		
<b>Your Job Title:</b>			
<b>Your Duties:</b>			
<b>Period of Employment</b>		<b>May we contact present employer? [ ] Yes [ ] No</b>	
<b>From</b>	<b>To</b>	<b>Name of Company:</b>	<b>Phone No:</b>
__/__/__	__/__/__		
<b>Total:</b>		<b>Address:</b>	<b>City/St/Zip:</b>
___ Yr(s) ___ Mo(s)		<b>Immediate Supervisor:</b>	
<b>Hours per week</b>	<b>Reason for Leaving:</b>		
<b>Your Job Title:</b>			
<b>Your Duties:</b>			

<b>Period of Employment</b>		<b>May we contact present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No</b>	
<b>From</b> __/__/__	<b>To</b> __/__/__	<b>Name of Company:</b>	<b>Phone No:</b>
<b>Total:</b> ___ Yr(s) ___ Mo(s)		<b>Address:</b>	<b>City/St/Zip:</b>
		<b>Immediate Supervisor:</b>	
<b>Hours per week</b>	<b>Reason for Leaving:</b>		
<b>Your Job Title:</b>			
<b>Your Duties:</b>			
<b>Period of Employment</b>		<b>May we contact present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No</b>	
<b>From</b> __/__/__	<b>To</b> __/__/__	<b>Name of Company:</b>	<b>Phone No:</b>
<b>Total:</b> ___ Yr(s) ___ Mo(s)		<b>Address:</b>	<b>City/St/Zip:</b>
		<b>Immediate Supervisor:</b>	
<b>Hours per week</b>	<b>Reason for Leaving:</b>		
<b>Your Job Title:</b>			
<b>Your Duties:</b>			
<p><i>Siuslaw Valley Fire/Rescue is an equal opportunity employer. All applicants and employees are assured of fair and equal treatment. SVFR will recruit, employ, and provide compensation, promotion, and other conditions of employment without regard to race, national origin, religion, disability, pregnancy, age, military status, sex, or any other protected status SVFR affirms that employment decisions shall be made on the basis of bona fide occupational qualifications. SVFR will continually review its employment practices and procedures to assure equality of employment opportunity. In implementing this policy, SVFR will comply with statements of national and state policy concerning equal opportunity employment.</i></p> <p>In submitting this application, I authorize investigation of all statements contained in it, and it is understood and agreed that any misrepresentation by me in this application or in any accompanying materials may result in cancellation of the application and/or termination from employment.</p> <p>I certify that I have read this entire application and that the information provided above is true and correct.</p> <p><b>Signature:</b> _____ <b>Date:</b> _____</p>			
Personnel use only: Application accepted <input type="checkbox"/> Yes <input type="checkbox"/> No    Qualified <input type="checkbox"/> Not Qualified <input type="checkbox"/> <input type="checkbox"/> Incomplete/Unsigned <input type="checkbox"/> Experience <input type="checkbox"/> Education <input type="checkbox"/> License/Certificate <input type="checkbox"/> Under 18 years of <input type="checkbox"/> Late submission <input type="checkbox"/> Illegible <input type="checkbox"/> Other			

# Siuslaw Valley Fire & Rescue

2625 HIGHWAY 101 N., FLORENCE, OR 97439  
OFC: (541) 997-3212 FAX: (541) 997-9116  
EMAIL: [SIGNUP@SVFR.ORG](mailto:SIGNUP@SVFR.ORG) WEB: [WWW.SVFR.ORG](http://WWW.SVFR.ORG)

# Questionnaire



**Potential Applicant. This Questionnaire is not a one-time document. Throughout your career with SVFR, you will see this document again. So, be honest, thoughtful and accurately answer the questions legibly.**

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Email Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Tel # Cell & Carrier: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

What is your past *volunteer* or work experience?

Are you aware, EMR or EMT Classes be required?

Do you have a valid driver's license and means of getting to a fire station?

Do you have any known fear of confined spaces, darkness or heights? Also, do you have any phobias?

What are some of your strengths **and** weaknesses?

How do you think your family would feel about you becoming a Volunteer Firefighter? Would you like one of our Firefighters talk to your family about your serving on the department?

Would you have any issues following orders from Fire Officers or those *in charge of you*?

This is an important question. If you had to work with someone you disliked, would this preclude you from showing up to Calls or Drills?

Why would you want to become a potential Volunteer Firefighter? Also, do you have aspirations on becoming a full-time Firefighter?

Why do you think we should select you to join our Fire Academy?

### **MAYBE MOST IMPORTANT: STATEMENTS & QUESTIONS**

Drills are mandatory on Tues (AM or PM), as well as Target Solutions and IFSTA (online classes). Responding to Incidents/Calls is why we are here. Calls can come at any time. Will you be a Social Media type Firefighter (one who proudly posts they are a Firefighter), but rarely responds to Calls? Or...are you willing to dedicate part of your time to coming on a reoccurring basis? We understand Family and Work are priorities, but when the Call goes out, your fellow Firefighters will rely on you to respond as well. Are you willing to give us some time too?

**\*\*\*\*\*SEE BACK PAGE FOR IMPORTANT INFORMATION\*\*\*\*\***

**VERY IMPORTANT:**

**Good Standing Order:** *You must be in Good Standing Order to receive “both” LOSAP and Stipends.*

- 1. Make a concerted effort to attend Tuesday Drills which must be at least 75% attendance to continue with SVFR. There are Tue morning or Tue afternoon opportunities. Also, possible makeups on some Saturdays.*
- 2. Target Solution assignments are mandatory (2 of 3 assignments).*
- 3. This includes responding to Incident/Medical Calls when possible (Minimum of 3 a month and 36 Per year)*
- 4. If you are on a Medical, Leave of Absence, Emergency or some other Bonafide reason, this can preclude the Good Standing Order status per occurrence. It's vital you communicate issues with us.*

There are two different Points systems. They are LOSAP and Stipends.

**LOSAP Info:** *LOSAP points given for your activity level and paid into your retirement account. 12 Points are needed per month for SVFR Contribution of \$25 into your Award Program. Points are awarded as: Drills/Scheduled training (4 pts); Target Solutions online assignments (3 pts); and a minimum of 3 emergency Calls (1 pt. each) per month. After 5 years, you're vested, and the money is yours. (Subject to change)*

**STIPENDS:** *In order to receive stipends for the flowing activities you do, you'll need to be in Good Standing Order. Each Stipend is worth \$8.50 and paid at the end of each month's pay period. Points are accumulated by Calls = 1 Pt; Drills = 1 Pt; Activities/Events: 1 Pt and Target Solutions: 1 Pt Each (2 Max). Also included is \$25.00 cell phone stipend if active with EnRoute Pro/FFRS and Good Standing Order. (Subject to change)*

*By signing below, you are confirming you understand Good Standing Order, LOSAP and Stipends.*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

*After Completion of this packet and if you would like to save some time, we will also need the following from you: 1. Driver's License; 2. SSN Card; 3. Passport or Birth Certificate; 4. Beneficiaries Name and their Social Security Number & their DOB. Also, a physical (Paid for by SVFR) will be required in Eugene and you need to make an appointment when we tell you it's time.*

Continue remarks here if you have more to add: