



Fire Department
Paid, On-Call Firefighter Application

We thank all applicants. Only those selected for an interview will be contacted. Print clearly and answer all questions.

Last Name: First Name: Initials:

Address: Apt. #:

City: Postal Code:

Telephone: () Other: ()

Email:

- Yes No Are you 18 years of age or older?
Yes No Are you legally eligible to work in Canada?
Yes No Do you have a valid Ontario Driver's License?
If "Yes", please indicate Class and Endorsements
Yes No Do you own a motor vehicle that is available to you at all times?
Yes No Do you live in the Municipality of North Middlesex?
Applicants must live within 10 kms of their station
Yes No Are you able to understand and communicate effectively in oral and written English?
Yes No Do you possess a Secondary School Diploma or equivalent?
Yes No Do you possess a valid certificate in First Aid and CPR?
Yes No Do you have any training that may be relevant to the fire service?
Provide details:
Yes No Have you been employed with the Municipality of North Middlesex in the past?
Yes No Do you have previous firefighting experience?
Previous volunteer firefighting experience must be accompanied by a letter of reference from the previous Fire Chief
Yes No N/A If you have previous firefighting experience, may we contact the department(s) regarding your work history?

Please indicate the station you are applying to be a member of:

- Ailsa Craig Parkhill

Please list your interests or hobbies:

Please list your volunteer experience (non-fire related):

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Employment Information

Your current/most recent employer:

Name: _____

Address: _____

Telephone Number: _____ Direct Supervisor: _____

Job Title and Responsibilities: _____

How long have you been employed there? _____

Yes No May we contact this employer regarding your work history?

Yes No N/A Are you able to leave work to respond to emergency calls?

Your previous employer:

Name: _____

Address: _____

Telephone Number: _____ Direct Supervisor: _____

Job Title and Responsibilities: _____

How long were you employed there? _____

Yes No May we contact this employer regarding your work history?

Yes No Have you completed the **Consent Waiver and Release Physical and Agility Testing** form?
(To be submitted with your **Volunteer Firefighter Application**)

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References

Please provide two (additional) employer references (other than relatives) that we may contact.

1. Name: _____ Telephone Number: _____

2. Name: _____ Telephone Number: _____

Please attach a Ministry of Transportation Driver's Abstract (issued within 30 days of this application).

You are encouraged to submit a resume, cover letter, copies of certificates and any other information that has not been covered in this application but which you would like to submit for review.

Conditions of Employment

I hereby certify that the information given or attached is true and correct. I understand that falsification of statements, misrepresentation, deliberate omission or concealment of information may be cause for immediate dismissal. I agree to have at my own expense a physical or medical examination including x-rays or other tests or procedures required by a medical doctor if requested by the North Middlesex Fire Department prior to appointment.

The Municipality of North Middlesex is an Equal Opportunity Employer. Accommodations will be provided upon request in accordance with the Accessibility for Ontarians with Disabilities Act (AODA). Personal information is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act and will only be used for the purposes of candidate selection.

Signature of Applicant

Date

This application should be mailed to, or dropped off to the attention of the Fire Chief, Municipality of North Middlesex, 229 Parkhill Main Street Parkhill ON, N0M2K0