## South Hutchinson Fire Department



Application

Dear Applicant,

Thank you for your interest in the South Hutchinson Volunteer Fire Department. Volunteer Fire Departments are the backbone of emergency response for small communities across Kansas and the Nation. Our department provides fire protection, rescue and EMS services to the City of South Hutchinson's population of 2,500 and over 100 large and small businesses, churches, schools, and shop owners. A volunteer firefighter is required to be physically fit, have a willingness to train, and be of good moral character. We are entrusted to help our citizens at their time of greatest need. The reward for serving as a volunteer firefighter is the satisfaction of knowing your sacrifice really does make a difference; every day of the week, every hour of the day.

Thank you again for your interest, I look forward to meeting you.

Sincerely,

Shae Barajas Brooks, Fire Chief

The following is the application and selection process.

- 1. Applicant must be 17 years of age.
- 2. Possess a valid Kansas Driver's License and proof of vehicle insurance.
- 3. High School Diploma or GED.
- 4. Submit a completed application to the Fire Chief.
- 5. Applications will be screened by a panel of Fire Department Officers.
- 6. Selected applications will be forwarded to the Police Chief for a driver's license, and criminal background check.
- 7. An informal interview will be conducted with the applicant(s) to welcome them, discuss the applicant's availability, and to answer questions about the department.
- 8. The Fire Chief will make the final selection of qualified applicant(s).
- 9. Once selected, the applicant must pass a drug screening, and meet with Human Resources.
- 10. The new firefighter will begin the department's orientation and probationary firefighter training program.

## MAIL OR RETURN YOUR COMPLETED APPLICATION TO THE CITY OFFICES AT 2 SOUTH MAIN, SOUTH HUTCHINSON, KS 67505. FOR QUESTIONS CALL (620) 663-7104

## South Hutchinson Fire Department

Application

(Applications that are not legible will not be considered)

Full Name (Last)	(First)	(Middle)	Date of Application:			
Current Address (City, State, Zip) Other address if current address is not permanent ( Cit	Valid Kansas Drivers License? Yes No License Number: A photocopy of your license is required at the time of application.		Are you at least 17 years of age and a citizen of the United States? Yes No Date of Birth?			
	1					
Home Phone:	E-mail address:		Social Security Number			
Cell Phone:						
Have you applied to this or other volunteer fire departments in the past? Yes No Where:	Do you have a high school diploma or GED? Yes No		Do you have a vehicle that you can respond to calls that is insured?			
			Yes No			
Emergency Contact: (Include Name, Relationship, Address, Phone Number(s) Employment : List your most recent employment and work schedule (We will not contact your employer)						
Are you a full or part time Student? Where are you going to school? When will you graduate?						
Yes No						
Have you ever been convicted, adjudicated, or plead no contest to a felony in Kansas or any other state? Yes No List all:						
Have you been convicted, adjudicated, or plead no contest to a misdemeanor in the last 3 years in Kansas or any other state? Yes No List all:						
Has your driver's license been suspended or revoked in the last 5 years? Yes No What were the details?						

Training and Certifications: Please list all mechanical skill, training, certifications, or courses, that you have completed that you feel may help you as a firefighter (Include any medical training):

Please list current or previous job skills, hobbies, or activities that you feel may help you as a firefighter.

Do you have experience driving large vehicles? If so what were they?

Can you drive a standard transmission vehicle?

Firefighter Job Duties – Health Statement

The job of a firefighter requires above average health and fitness. The work environment for a firefighter is hazardous. Extremes in heat and cold, exposure to chemical and biological-hazards as well as the by-products of fires are to be expected. A firefighter is expected to perform their duties under extreme physical and mental conditions while wearing heavy protective equipment and will be required to wear a Self Contained Breathing Apparatus (SCBA). Severe injury or death is a possibility. Health conditions with regard to heart and lung, or other physical and or emotional impairments could endanger not only the firefighter, but also his or her fellow firefighters as well as put the City of South Hutchinson at risk.

The fire department does not require a pre-employment physical but we do rely on the applicant to be honest about their ability to perform the job duties of a firefighter as indicated above. Specific questions on medical conditions that would impact an applicant's health as a firefighter should be directed to their personal physician.

I have read and understand the health statement above and submit that I am capable of performing the duties of a firefighter for the City of South Hutchinson.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

Availability:

What is your availability to respond to at least 70% of the calls during the time indicated? Write YES or NO in each box or indicate a different time.

	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
8:00 AM – 5:00 PM							
5:00 PM – 8:00 AM							
Other (Indicate times)							

Does your work or school schedule rotate or change throughout the week or month? Seasonal? Please explain.

Authorizations and Signatures:

I authorize the City of South Hutchinson Kansas to verify the information that I have provided within this application (Except where noted). I further understand that a criminal background check and driver's license check will be conducted by the South Hutchinson Police Department. I understand that I will be administered a drug test at the completion of the selection process. I acknowledge that any information that I have provided that is false or inaccurate may result in my application being rejected.

Applicant Signature \_

Date \_\_\_\_\_

## FOR OFFICIAL USE ONLY

Applicants do not write below this line

Date Application Received:	
Background and DL check performed on this date:	
Background and DL check performed by:	
Disposition of background and DL check:	
No problems indicated	
• Details concerning background, DL check	
FD Interview Panel Chairperson:	Date of Interview:
Notes:	
Drug Test Results: Negative	Positive
Applicant <u>IS</u> accepted for membership / A	applicant IS NOT accepted for membership
Fire Chiefs Authorization (Signature):	Date:
	SHFD Application -01/19/2021   4