

DATE RECEIVED _____

RECEIVED BY _____



TOWN OF ABINGDON FIRE DEPARTMENT APPLICATION FOR PART-TIME EMPLOYMENT

INSTRUCTIONS: It is important that you fill out all sections of this application completely and to the best of your ability. Your application will be used as part of the examination process and therefore should represent your best effort.

COMPLIANCE NOTICE:

1. By signing this application you attest that you will not have facial hair which will conflict with the wearing of a self-contained breathing apparatus (SCBA).
2. By signing this application you attest that you do not and will not deliberately smoke or vape any substance where the resulting smoke or vapor is breathed in tasted or absorbed into the bloodstream or lungs.
3. By signing this application you attest that you will achieve Firefighter I Certification as administered by the Virginia Department of Fire Programs within 12 months of Department Membership acceptance.
4. By signing this application you attest that you consent to a physical examination and drug screen.

Signature of Applicant

NOTE: Applicants not wishing to sign the above need not complete this application.

Applications will be held on file for 6 months from the date received.

APPLICANTS CURRENT INFORMATION:

Name _____
Last First Middle

Present Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Telephone _____
Home Work Cell

Are you at least 18 years of age? Yes _____ No _____ If no, what is your birth date? _____

GENERAL INFORMATION:

Do you have any firefighting experience? Yes _____ No _____ If yes, please list _____

Sex: Male _____ Female _____ Height: _____ Feet _____ Inches Weight: _____ lbs

Have you ever been convicted of a felony? Yes _____ No _____ If yes, please explain _____

Have you been convicted of a traffic violation within the past 5 years? Yes _____ No _____ If yes, please explain _____

Drivers License Number _____ Issuing State _____

EDUCATION: High School _____ College _____

Please list any skills, abilities, special certifications, licenses, special training courses, etc., you have that are applicable to firefighting:

EMPLOYMENT:

Current or most recent employment:

Job Title _____ Name and Title of Supervisor _____

Number of employees you supervise(d) _____ Employer/Company _____

Employers Address _____
Street City State Zip

Date Employed _____ Phone Number _____ Duties _____

Full-time _____ Years _____ Months Part-time _____ Years _____ Months _____

NOTE: If you are currently employed, may we inquire with your employer concerning your qualifications and character? Yes _____ No _____

Next most recent employment:

Job Title _____ Name and Title of Supervisor _____

Number of employees you supervised _____ Employer/Company _____

Employers Address _____
Street City State Zip

Date Employed _____ Phone Number _____ Duties _____

Full-time _____ Years _____ Months Part-time _____ Years _____ Months _____

Reason for leaving: _____

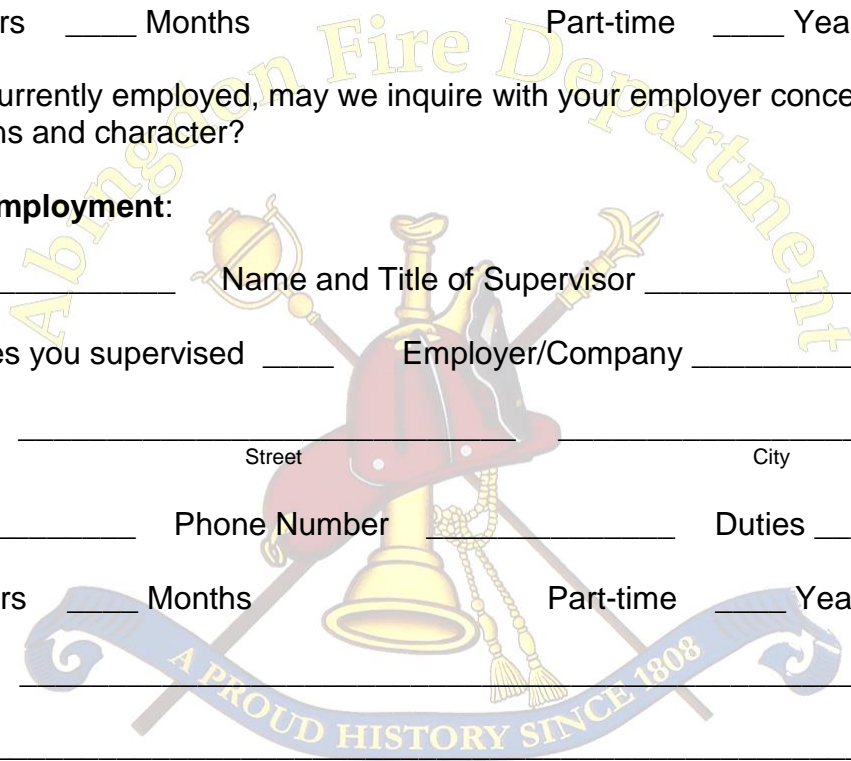
SPECIAL INFORMATION:

Will it be agreeable with your employer for you to leave your job and respond to a fire call? Yes _____ No _____

Are you available for service after scheduled work hours? Yes _____ No _____

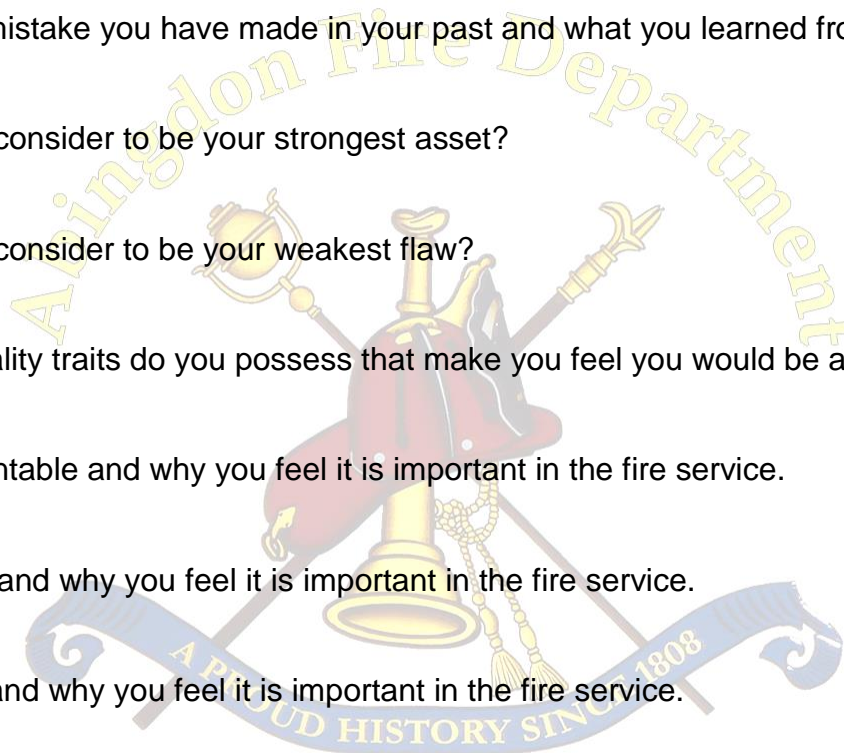
Will you attend all drills, schools and meetings of the Department? Yes _____ No _____

If no, please explain _____



PLEASE LEGIBLY PRINT OR TYPE YOUR ANSWERS ON SEPARATE PAPER

1. Please prioritize the following in order of importance to you and explain your order: Career, Family, Friends
2. Describe a difficult decision that you have had to make in your life. What were the circumstances and what was your decision? Would you make the same decision again?
3. Tell about a conflict you have had with a co-worker or supervisor. What actions did you take to resolve the conflict? What did you learn from the conflict? What would you do differently if the same situation arose again?
4. Tell about a mistake you have made in your past and what you learned from that mistake.
5. What do you consider to be your strongest asset?
6. What do you consider to be your weakest flaw?
7. What personality traits do you possess that make you feel you would be a good firefighter?
8. Define accountable and why you feel it is important in the fire service.
9. Define honor and why you feel it is important in the fire service.
10. Define pride and why you feel it is important in the fire service.
11. Define tradition and why you feel it is important in the fire service.
12. Define integrity and why you feel it is important in the fire service.
13. Define loyalty and why you feel it is important in the fire service.
14. You suspect a fellow firefighter has a drug problem. What would you do?
15. Why do you want to be an Abingdon Firefighter?



Abingdon Fire Department



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