Instructions to Firefighter Applicants

Thank you for your interest in working with the North Okaloosa Fire District.

- Please complete the attached application, circle/initial where requested, sign the application and have the Pre-Employment Statement page and Tobacco Affidavit notarized.
- You will need to attach any certificates of competency/completion (Firefighter II, EMS, etc.) to your application.
- You will need to request a copy of your driving record. If local to the Crestview area, you can do this at the Department of Motor Vehicles, 302 N. Wilson St, Suite 101.
- You will also need to provide a copy of the search for a criminal history record. This is available at. State of Florida Criminal History Record Check Florida Department of Law Enforcement and must be the certified search.
- Once notified about the interview, you will also be scheduled to do a drug test at our local facility.

Once all forms are received your application will be considered. All pages must be complete, or your application may not be considered. There is a total of nine (9) pages for this application, including this page. Questions may be directed at 850-682-1808.

FIREFIGHTER EMPLOYMENT APPLICATION

North Okaloosa Fire District (NOFD)
P. O. Box 973, Crestview, FL 32536
An Equal Employment Opportunity Employer

Date of Application: _____

Position(s) Applying For:

___ Full-Time Firefighter ___ Relief Firefighter ___Volunteer Firefighter

PERSONAL INFOMATION

Name in full: _____
Last First Middle Other name(s) used

Home Address: _____
Street and Number City, State, Zip Code

Home or Cell Phone: _____ Work Phone:_____

EDUCATION

Name and Location	From Mo/Yr	To Mo/Yr	Course of Study	Graduate Yes or No	Specific Degree	GPA (out of 4.0)
High School						
Trade/Technical School						
College						
Other						

REFERENCES

Please provide a minimum of four references. Two must be a former employer, if applicable. Do not list family members/relatives.

Name	Address	Phone
Relationship:		
Name	Address	Phone
Relationship:		
Name	Address	Phone
Relationship:		
Name	Address	Phone
Relationship:		

EMPLOYMENT HISTORY

Account for the last five years beginning with your most recent employment. All time must be accounted for. List each company's name, address, and telephone number (including area code). Use reverse side of page if you need more space for explanation or listing of employers.

Company Name				Company Address	Type of Business
Phone Number					Supervisor
Position Title				What did you like least about this job?	
Employed		Hourly Wage		Reason for leaving	
From (Mo/Yr)	To (Mo/Yr)	Start	End	Duties performed:	
Company Name				Company Address	Type of Business
Phone Number					Supervisor
Position Title				What did you like least about this job?	
Employed		Hourly Wage		Reason for leaving	
From (Mo/Yr)	To (Mo/Yr)	Start	End	Duties performed:	
Company Name				Company Address	Type of Business
Phone Number					Supervisor
Position Title				What did you like least about this job?	
Employed		Hourly Wage		Reason for leaving	
From (Mo/Yr)	To (Mo/Yr)	Start	End	Duties performed:	
Company Name				Company Address	Type of Business
Phone Number					Supervisor
Position Title				What did you like least about this job?	
Employed		Hourly Wage		Reason for leaving	
From (Mo/Yr)	To (Mo/Yr)	Start	End	Duties performed:	
Company Name				Company Address	Type of Business
Phone Number					Supervisor
Position Title				What did you like least about this job?	
Employed		Hourly Wage		Reason for leaving	
From (Mo/Yr)	To (Mo/Yr)	Start	End	Duties performed:	

APPLICATION QUESTIONS AND AFFIDAVIT

Are you currently participating in the Military Reserve or National Guard? Yes No

Are you at least 18 years or older? (If no, you may be required to provide authorization to work.) Yes No
Have you ever been employed with the North Okaloosa Fire District? Yes No If yes, please provide the dates and name employed under.

Do you have relatives currently employed with the North Okaloosa Fire District? Yes No
If yes, please list name(s) and relationships(s).

Do you have a valid Florida Driver's License (Class E)? Yes No

Have you had any traffic violations and/or had your license suspended or revoked during the last seven (7) years? Yes No If yes, please explain.

Have you ever been convicted, plead guilty or no contest (Nolo Contender), had adjudication withheld, prosecution deferred, been placed on probation, received a suspended sentence or forfeited bail in connection with any criminal violation of the law, including criminal traffic offenses? (A conviction record does not necessarily disqualify you from employment. Factors such as age at time of offense, nature of violation and rehabilitation will be considered. Provide all the facts.) Yes No If yes, please list all convictions, including driving while intoxicated (DUI) convictions and explain.

Have you been arrested for any matters for which you are currently out on bail or your own recognizance pending trial? Yes No If yes, please explain.

Have you ever been a defendant in a civil suit on an international tort (assault, battery, false imprisonment, invasion of privacy, intentional infliction of emotional distress, intentional wrong death)? Yes No If yes, please explain.

Have you ever been terminated, resigned in lieu of termination or corrective action, or asked to resign from any job? Yes No If yes, please explain.

Are you able to perform the essential functions of the position applied for and described in the job description or as demonstrated by a District representative with or without a reasonable accommodation? Yes No

PRE-EMPLOYMENT STATEMENT

Please read the following statements carefully. They constitute important conditions for employment with the North Okaloosa Fire District. Please circle Yes and place your initials in the box if you understand and agree to the statement.

I certify that the information I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume, or any other materials, or during any interviews, can be justification for refusal of employment, or if employed, termination from the District. I have read and understand the job description for the position that this application pertains to and hereby certify that I am able to fulfill all the job qualifications. Any offer of employment I may receive from the District is contingent upon my successful completion of the District's pre-employment screening process.

Yes ☐

I understand the District has a Substance Abuse Policy that promotes an alcohol and drug-free work environment. I understand that drug/alcohol testing is conducted in accordance with the terms of the Substance Abuse Policy. I also understand positive drug test results will disqualify job applicants from employment with the District, and may result in termination, if I am employed with the District. I understand the District has a Dress and Appearance Policy that prohibits some tattoos and requires new employees to have all tattoos covered during the work shift. I understand the District has a Smoking and Tobacco Use Policy that prohibits smoking and any other form of tobacco use. Copies of the above-mentioned policies are available at the District Office.

Yes ☐

I authorize and request that all of my present and former employers and those individuals I have listed as references furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damages arising from furnishing the requested information.

Yes ☐

In consideration of my employment, I agree to comply with the policies, rules, regulations, and procedures of the District and understand that within the limits of any constitutional or statutory limits applicable, my employment is considered "at will" and, although the District may provide notice to me and expect notice from me, I can be terminated at any time. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the District is authorized to make any assurances to the contrary. No implied oral or written agreements contrary to this are valid unless they are in writing and signed by the District Fire Chief.

Yes ☐

I understand that if offered employment with the District, I will be required to provide my social security number. I further understand that my social security number will be used for identification, pre-employment screening, benefit administration, income reporting, and education/certification verification.

Yes ☐

I understand that if I am hired, I will be required to participate in the District's direct deposit program into the account of my choice.

Yes ☐

I, _____ do hereby affirm that I:

1. Am a high school graduate or the equivalent, as the term may be determined by the Florida Division of State Fire Marshal;
2. Am at least 18 years of age;
3. Neither have been convicted of a felony or of a misdemeanor directly related to the position of employment sought, nor have pled nolo contendere to any charge of a felony. (If an applicant has been convicted of a felony, such applicant must be in compliance with s.112.011(2)(b) Florida Statutes. If an applicant has been convicted of a misdemeanor directly related to the position of employment sought, such applicant shall be excluded from employment for a period of 4 years after expiration of sentence. If the sentence is suspended or adjudication is withheld in a felony charge or in a misdemeanor directly related to the position of employment sought and a period of probation is imposed, the applicant must have been released from probation); and
4. Have a good moral character as may be determined by investigation under procedure established by the Florida Division of State Fire Marshal.

Under penalty of perjury, I declare that I have read the foregoing and the facts are true.

I, _____ do hereby affirm that the above information is true and correct to the best of my knowledge.

DATED and SIGNED this _____ day of _____, 20____.

_____
Signature of Applicant

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20____, by _____, who is personally known to me OR who produced

_____, as identification and who did take an oath.

_____
Notary Public Signature

My Commission Expires:

NOTARY PUBLIC

State of _____ at large

_____

TOBACCO AFFIDAVIT

Please type or print legibly.			
NAME: LAST	FIRST	MI	DATE OF BIRTH (M/D/Y)
HOME ADDRESS	CITY	STATE	ZIP CODE
E-MAIL ADDRESS		CONTACT PHONE NUMBER	

I confirm I have been a nonuser of tobacco or tobacco products for at least one year immediately preceding application as required by Florida State Statute 633.412.

SIGNATURE **DATE**

NOTARIZED

STATE OF FLORIDA
COUNTY OF

On _____, _____, _____ personally
(month and day) (year) (Applicant's Name)
appeared before me and, _____ who is personally known to me, or _____ who has

provided _____ as identification.

_____
Notary Public Signature

Commission expires: _____

PLEASE AFFIX SEAL ABOVE

APPLICANT AGREEMENTS WITH NORTH OKALOOSA FIRE DISTRICT

I understand that, if hired as an employee, I will be placed on a one-year probationary period. I further understand that, in accordance with Florida Statute Section 443.131(3)(a)2, if I am terminated for unsatisfactory work performance within the probationary period, the employer's unemployment account shall not be charged for any unemployment benefits paid to me. (The six-month probationary period is for job performance only. Benefits for full-time employees will be effective immediately upon processing.) Initials _____

I understand that my appointment is contingent upon the Board of Fire Commissioners accepting the decision of the Hiring Authority to hire me. In the event the Board does not concur with the decision, my employment will be terminated immediately without cause under the Probationary Period Agreement. Initials _____

The North Okaloosa Fire District may make pre-employment investigations of employment history, and criminal and traffic background by obtaining information from previous or current employers and law enforcement agencies who may properly receive and report this information. Initials _____

I understand that I will be furnished equipment as part of my service with the North Okaloosa Fire District (NOFD). I agree to take care of the equipment in a reasonable manner and notify a chief officer if the equipment is damaged so that it can be repaired/replaced. I further understand that upon termination of my service with NOFD, I am responsible for returning all issued equipment within 14 days. If the equipment is not returned within that time, the NOFD will charge me for the equipment and that I will pay this amount. Further, if at any time I owe funds to the NOFD, I agree to repay all these funds before my last day of work. If this is not possible, I agree to have all funds owed withheld from my last paycheck. I must meet with a chief officer as part of my exit interview to agree on the amount owed. Initials _____

I understand that within 30 days of my employment as a firefighter, I am responsible for reading all North Okaloosa Fire District Board Policies and Departmental Standard Operating Guidelines, Standard Operating Procedures, and Operational Memorandums. Further, I agree to abide by those policies, guidelines, procedures, and memorandums. Initials _____

Applicants Signature: _____ Date: _____

TO BE COMPLETED BY A NORTH OKALOOSA FIRE DISTRICT REPRESENTATIVE

Date Employed: _____ Start Date: _____ Hired at $ _____/Hour

North Okaloosa Fire District Representative's Signature: _____