

CITY OF TUSCOLA ~ TUSCOLA FIRE DEPARTMENT

214 NORTH MAIN STREET
TUSCOLA, IL 61953
TEL. (217) 253-2112
FAX (217) 253-5026



Application for membership- paid-on-call firefighter

Please Print

Name _____ Date _____

Present Address _____
Street
City
State
Zip Code

Phone _____ Email address _____

Are you legally authorized to work in the United States? No Yes

Are you over the age of 18 years? No Yes

If under the age of 18, you may not be allowed to work in some safety sensitive positions.

Education

	School Name & Location	Course or Major	Number of Years Completed
High School			
College			
Other			
Fire Service Training			

Attach additional sheet if needed to fully list fire service or first responder training.

Current Employment/Occupation

Employer	Location of Employment	Work Days/Hours
Can you leave your job if called to an emergency?		

Fire Service, Personal & Professional References

Name	Company/Position	Phone	When may we contact?
1.			
2.			

If accepted for membership, on what date will you be available to begin taking calls? _____

Employment History

Please attach additional sheets as necessary to complete 10 years history

List employers beginning with more recent. Include dates of military service.

Name of Firm	Type of Business	Employed From To
Location	Supervisor	Reason for Leaving
Your position/duties		Reference Contact?
Name of Firm	Type of Business	Employed From To
Location	Supervisor	Reason for Leaving
Your position/duties		Reference Contact?
Name of Firm	Type of Business	Employed From To
Location	Supervisor	Reason for Leaving
Your position/duties		Reference Contact?

Personal

In the event of an emergency, notify:	
Name _____	Phone _____
Address _____	

Authorization/Acknowledgement

The Tuscola Fire Department has adopted standards of fitness, conduct and responsibility (copy attached) for its member firefighters. By submitting this application, you agree that you know of no condition that would prevent you from fulfilling those standards and that you are willing and able to meet those standards.

I authorize all corporations, former employers, associates, credit agencies, educational institutions, law enforcement agencies, city, state, county and federal courts, military services and persons to release information they may have about me to the person or company with which this form has been filed, or their agent. I release all parties involved from any liability and responsibility for doing so.

I understand that the City of Tuscola is a drug and alcohol free work place and as such all employees of the City of Tuscola are subject to the City's drug and alcohol policies. All applicants considered for hire will be tested, according to our policies, as a condition of employment. Further I understand that I may be included in an ongoing random drug and alcohol testing program.

My status as an employee shall remain at all times an "employee at will" and no contracts expressed or implied have been offered to me. Finally, if any information provided by me on this form or attached hereto should prove false, disciplinary action up to and including discharge may be taken by the City.

Applicant's Signature

Date

FIRE DEPARTMENT TRAINING & EXPERIENCE WORK PERFORMANCE TEST

1. **SCBA USE** Familiar with self-contained breathing apparatus; demonstrate effective operation and use of SCBA.
2. **VICTIM RESCUE** Carry or drag 100-pound rescue dummy 100 feet.
3. **STAIRWAY CLIMB** Carry a 50-foot section of 3-inch hose up 3 floors of stairs and return to the same starting point.
4. **LADDER** Climb up and down a 35-foot ladder.
5. **HOSE OPERATION** Advance a charged 1 3/4" line 150 feet and operate nozzle in full turnout gear.