



FIREFIGHTER EMPLOYMENT APPLICATION

An Equal Opportunity Employer

Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, marital or veteran status, or disability.

PERSONAL INFORMATION

Name: _____ SS#: _____

Last
First
Middle

Address: _____

Mailing Address
City
State
Zip Code

Home Telephone: (_____) _____ Other Telephone: (_____) _____

Email Address: _____

Date Applied: _____ Are you currently certified as a Firefighter II within the State of Ohio? Yes No

Are you currently certified as an EMT-Paramedic, EMT-Intermediate, or EMT-Basic in the State of Ohio? Yes No
 If yes, what is your Certification Number? _____ If yes, what is your expiration date? _____

Have you ever been employed by Harison Township? Yes No
 If yes, please provide dates previously worked and position(s) held: _____

EDUCATION

Type of School	Name & Location of School	Degree	Area of Study
High School		Graduate: <input type="checkbox"/> Yes <input type="checkbox"/> No or G.E.D.: <input type="checkbox"/> Yes <input type="checkbox"/> No	
College, University, Business, Technical, Vocational, or Military Academy		Dates Attended (Mo./Yr. To Mo./Yr.): Degree:	
Graduate or Professional School		Dates Attended (Mo./Yr. To Mo./Yr.): Degree:	

Are you currently enrolled in an educational program? Yes No If yes, what is your main course of study and where are you attending? _____

LICENSES, CERTIFICATIONS, REGISTRATIONS

I possess: a valid Driver's License _____ a valid Commercial Driver's License _____
please list state and number please list state and number

Professional/Technical Licenses and Registrations

Type	State	Number	Expiration Date (if any)

MILITARY SERVICE

Were you in the U.S. Armed Forces: Yes No If yes, what branch? _____

Dates of Services: From: _____ to _____ Rank: _____

Technical Specialization: _____

AWARDS, HONORS, ACHIEVEMENTS, INTERESTS

Please list any awards, honors, achievements, volunteer or community services activities, special interests, hobbies, or any organizations of which you are/have been a member. Please indicate any positions of leadership previously/currently held.

TRAINING AND OTHER QUALIFICATIONS

Please list any training you feel is relevant to the position for which you are applying:

Subject Area of Training	Organization Providing Training	Year Training Received

Please use this area to briefly describe any additional information or special qualifications you have for the position for which you are applying. Please be sure to include any special machinery, office equipment, software, tools, vehicles, or other job-related items.

EXPERIENCE

List your work experience starting with your current/most recent employer. Please include all employment whether full-time, part-time, seasonal, or temporary during the past ten years. You may include additional experience beyond the past ten years if you desire and you are encouraged to do so if it is related to the employment you are seeking. You may attach additional pages, if necessary. Please not use a resume as a substitute for completing this section; however, you may attach a resume to supplement the information contained within this employment application.

Current/Most Recent Employer: _____

Address: _____
Mailing Address City State Zip Code

Supervisor's Name: _____ Phone Number: (____) _____

Position Held: _____ Salary: _____

Dates of Employment: _____ to _____ Type of Employment: Full-Time Part-Time Seasonal/Temporary

Description of duties and responsibilities:

Reason for Leaving:

Harrison Township may contact former employers. If you prefer that we do not contact your present employer until which time a conditional offer of employment would be made, please check this block:

Previous Employer: _____

Address: _____
Mailing Address City State Zip Code

Supervisor's Name: _____ Phone Number: (____) _____

Position Held: _____ Salary: _____

Dates of Employment: _____ to _____ Type of Employment: Full-Time Part-Time Seasonal/Temporary

Description of duties and responsibilities:

Reason for Leaving:

EXPERIENCE (continued)

Previous Employer: _____

Address: _____
Mailing Address City State Zip Code

Supervisor's Name: _____ Phone Number:(_____)_____

Position Held: _____ Salary: _____

Dates of Employment: _____ to _____ Type of Employment: Full-Time Part-Time Seasonal/Temporary

Description of duties and responsibilities:

Reason for Leaving:

Previous Employer: _____

Address: _____
Mailing Address City State Zip Code

Supervisor's Name: _____ Phone Number:(_____)_____

Position Held: _____ Salary: _____

Dates of Employment: _____ to _____ Type of Employment: Full-Time Part-Time Seasonal/Temporary

Description of duties and responsibilities:

Reason for Leaving:

REFERENCES

Please list three individuals, other than relatives, whom we may contact as references regarding your character, ability, or experience.

Name	Home Phone Number (with area code)	Work Phone Number (with area code)	Type of Reference (personal, professional, educational, etc.)

CERTIFICATION AND STATEMENT OF UNDERSTANDING

I certify that all the information furnished in this employment application and its addenda is true and complete to the best of my knowledge. I understand that the Harrison Township Fire Department may investigate the information I have furnished, and I realize that any misrepresentation or false information in this application and its addenda may lead to withdrawal of any employment offer or termination after employment.

Signature: _____

Date: _____

ACKNOWLEDGEMENT & RELEASE

(Please read thoroughly before signing.)

I hereby acknowledge that I, voluntarily and of my own free will, have applied for employment with Harrison Township with the understanding that the Township may use a variety of screening procedures to evaluate my qualifications and suitability for appointment. I have been advised that these screening procedures may include, but are not limited to, interviews, criminal record checks, driving record checks, polygraph examinations, written testing, reference checks, background investigations, psychological evaluations, medical examinations, and drug testing. I hereby understand that I would not be required to participate in a psychological evaluation, medical examination, or drug test until after I have received a conditional offer of employment. I also acknowledge that I may also be subject to other screening procedures, not specifically listed above. I further acknowledge that any such screening procedures, as reasonably required by the Harrison Township Fire Department, are a prerequisite to my appointment to a position with Harrison Township.

In addition, I also hereby understand that Harrison Township cannot guarantee the confidentiality of the results of, or information obtained through, the screening procedures. Rulings of the Ohio Supreme Court relative to the Public Records Act indicate that, with certain enumerated exceptions, records maintained by a governmental entity are a matter of public record and, should a proper request be made by a member of the public for such records, the governmental entity would be required to make such records available to that member of the public within a reasonable period. Employment-related documents, except for medical records, maintained by the Township relative to the screening procedures do not appear to fall within any of the enumerated exceptions.

Therefore, in consideration of my employment application being reviewed and considered by Harrison Township I, being at least 18 years of age and under no legal disability, on behalf of my heirs and assigns, hereby release, and agree to hold harmless, Harrison Township and any of its agents, employees, or related officials from all liability, whatever the type and nature, resulting from the administration of any such screening procedures and/or the release of the results therefrom.

Signature of Candidate: _____

Date: _____

Signature of Witness: _____

Date: _____

PRE-EMPLOYMENT DRUG TESTING CONSENT

I understand that, as a candidate for employment with the Harrison Township Fire Department, I must, in order to be appointed to a position with the Harrison Township Fire Department, voluntarily consent to, and pass, a urinalysis to detect the presence of drugs in my system. I also understand that I will not actually be administered such a test until I have received a conditional offer of employment. I further understand that my application for employment will be rejected if I decline to sign this consent and thereby decline to be tested, if my test results are confirmed to be positive for the presence of illegal drugs or legal drugs for which I cannot submit sufficient proof that such drugs were legally obtained and used, or if masking agents are detected in any specimen I provide as part of the testing procedure.

I hereby knowingly and voluntarily consent to participate in a substance abuse urinalysis and authorize the Harrison Township Fire Department to conduct, through its designated testing laboratory or other licensed/certified medical professionals/technicians, said urinalysis. In addition, I authorize the designated testing laboratory or other licensed/certified medical professionals/technicians to release all information regarding the test(s), including results, to the Harrison Township Fire Department and its representative. I further release the Harrison Township Fire Department, its officers, directors, employees, agents, representatives from all claims, suits, causes of action, liability, and damages arising from my submitting to the test(s) and from the information obtained from the test(s).

Signature of Candidate: _____ Date: _____

Signature of Witness: _____ Date: _____

I refuse to consent to a urinalysis.

Signature of Candidate: _____ Date: _____

Signature of Witness: _____ Date: _____

**DRUG AND ALCOHOL TESTING
ACKNOWLEDGEMENT, RELEASE AND CONSENT**

Harrison Township is committed to providing employees with a safe, healthy, and productive environment by maintaining a drug and alcohol-free workplace. I acknowledge that Harrison Township has an Employee Drug Testing Policy, which requires Employees to submit to drug and-or alcohol testing on a quarterly random basis; when there is reasonable belief that his/her work performance is adversely affected by the presence of alcohol or illegal drugs in his/her system; and in the event of an accident on Township Premises or involving damage to Township Property (post-accident). I further acknowledge that the method of testing used by Harrison Township would include, but is not limited to, urinalysis, breath testing, and blood analysis.

I understand that I should I be appointed to a position with Harrison Township, I may be required to submit to drug/alcohol testing one or more times during my employment with Harrison Township for the reasons specified above. I also understand that I would be subject to appropriate disciplinary action, including suspension or dismissal, if the results are positive, if masking agents are detected in specimens, I provide in conjunction with the testing procedure, or if I refuse to be tested.

I hereby knowingly and voluntarily consent to drug and/or alcohol testing for the reasons specified above after appointment to a position with Harrison Township, and authorize Harrison Township to conduct, through its designed testing laboratory or other licensed/certified medical professionals/technicians, urinalysis, breath testing, or blood analysis. In addition, I authorize the designated testing laboratory or other licensed/certified medical professional /technicians to release any and all information regarding the tests, including their results, to Harrison Township and its representatives. I further release Harrison Township, its officers, directors, employees, agents, representatives, from all causes of action, liability, and damages arising from my submitting to the tests and from the information obtained from the tests.

Signature of Candidate: _____ Date: _____

Signature of Witness: _____ Date: _____

**HARRISON TOWNSHIP FIRE DEPARTMENT
BACKGROUND REMOVAL STANDARDS**

Pursuant to Revised Code §9.73, the following criteria and/or provisions of state and/or federal law are detailed so as to notify any prospective candidate for employment with the Harrison Township Fire Department of any disqualifying criminal history. This list does not preclude the Harrison Township Fire Department from removing a candidate for consideration for criminal history discovered during the background investigative process.

A. Honesty/Falsification - Candidates will be removed from the eligibility list for any of the following reasons:

1. At any stage of the background investigation process, the candidate fails to disclose or acknowledge the use or purchase of any illegal drug(s), and at a subsequent stage in the process, the candidate admits to the use of an illegal drug, as an adult.
2. At any stage of the background investigation process, the candidate provides substantially inconsistent responses regarding illegal drug(s) or alcohol used or purchased by the candidate, as an adult.
3. At any stage of the background investigation process, the candidate fails to disclose or acknowledge any disqualifying behavior or activity on the part of the candidate, as an adult, relative to, and governed by, any of the Background Removal Standards.
4. Failure or refusal to answer or respond to oral or written questions during any phase of the selection process.
5. Failure to completely answer or respond to any questions contained in the Personal History Questionnaire.
6. Any attempt to distort the psychological examination results.
7. Use or attempted use of political influence to secure employment.
8. Other related and/or similar occurrences, incidents, events, conduct, or behaviors that would be unacceptable or undesirable in a Fire Department given the power and responsibilities incumbent to the position.

For purposes of this standard, and Background Removal Standard H., the “use” of drugs occurs when an candidate smokes, puffs, ingests, tastes, injects, inhales, or otherwise tries, any illegal drug, including but not limited to, marijuana, cocaine, anabolic steroids, or chemical inhalants.

B. Family History - Candidates will be removed from the eligibility list for any of the following reasons:

1. A conviction of a misdemeanor crime of domestic violence involving use of force or threatened use of a deadly weapon is a permanent disqualifier under State and/or Federal laws.
2. Non-compliance with a court order or legal contract to provide child support, alimony or other financial responsibility as determined by the appropriate support enforcement bureau or a court of law within the preceding five (5) years.
3. Intentional violation of any protective or temporary restraining order as determined by a court of law within seven (7) years.
4. Verified or admitted sexual abuse as an adult of one's spouse, ex-spouse, child, stepchild, and parent or other relative or person with whom one lived or has an intimate relationship.

5. Verified or admitted physical abuse as an adult within the last ten (10) years or sexual abuse of one's spouse, ex-spouse, child, stepchild, parent or other relative or person with whom one lived or has an intimate relationship.

C. Employment – Candidates will be removed from the eligibility list for any of the following reasons:

1. Two (2) or more involuntary terminations and/or discharges from employment within the last five (5) years. This shall not include terminations resulting from a business ceasing operations or resulting from being laid off from a position of employment.
2. Probationary and/or post-probationary termination from any public safety occupation.

D. Military History - Candidates will be removed from the eligibility list for any of the following reasons:

1. Discharge from military service with any classification other than honorably discharged.
2. Conviction of any article of the Uniform Code of Military Justice that would be equivalent to a felony under the Ohio Revised Code (ORC).

E. Traffic – Candidates will be removed from the eligibility list for any of the following reasons:

1. Any conviction of vehicular homicide shall permanently eliminate a candidate from consideration.
2. Driving under the influence of alcohol or drugs:
 - a) Conviction within the past five (5) years, or
 - b) More than one (1) OVI conviction as an adult; or
 - c) More than two (2) OVI convictions, if one of the convictions was as a juvenile.
3. Three (3) moving violations in the past three (3) years as an adult.
4. At the time of the interview or psychological examination, the candidate does not possess a valid driver's license and auto insurance as required by the residence state and if the candidate owns a car.

F. Gambling - The term "gambling offense" shall include any activity defined as gambling by a federal, state, local statute, or ordinance in the jurisdiction where the activity occurred. Candidates will be removed from the eligibility list for any of the following reasons:

1. Conviction of a gambling offense, within the last five (5) years.
2. Admission to gambling that has resulted in an unstable financial or credit history within the last seven (7) years.
3. Conviction of or admission to engaging in the promotion of illegal gambling activity wherein the candidate gains a financial benefit.

G. Illegal Substances– Candidates will be removed from the eligibility list for any of the following reasons:

1. Any use or purchase of drugs of abuse (except marijuana) within three (3) years before application. Drugs of abuse include chemical agents/solvent-based substances and prescription drugs taken for reasons other than intended use, in more than one incident and without a prescription, especially Schedule I, II and III drugs.
2. Any use, purchase, or cultivation of marijuana within one (1) year before application or any time during the selection process.
3. Any illegal manufacture or sale of drugs of abuse, marijuana or prescriptive drugs. If the substance was sold without profit to the candidate, the amount sold was de minimus, and the sale(s) occurred when the candidate was a juvenile or more than five (5) years ago, then the above Rule shall be negated.

For the purposes of this standard, the “purchase” of marijuana or other illegal drugs include those purchases made by pooling of resources or money by the candidate and others for substances for their own use.

I. Candidate non-responsiveness – a candidate shall be removed from the process for any of the following reasons:

1. Failure to appear for pre-interview/interview.
2. Failure to appear for psychological examination.
3. Failure to appear for medical/stress test.
4. Failure to return Personal History Questionnaire or Supplemental Questionnaire, or to respond to phone calls or correspondence from Background personnel.
5. Unable to locate at physical address/phone number/electronic mail address on file.
6. Candidate is no longer interested in employment with the Department.
7. Failure to appear for oral board.