

Municipalities of Chapple, Emo and LaVallee

APPLICATION FOR EMPLOYMENT

JOINT FIRE CHIEF POSITION

PERSONAL INFORMATION:

Name: _____

Telephone Number(s): _____

E-mail Address: _____

Mailing Address: _____

Preferred method of contact during the daytime: _____

GENERAL:

Are you legally entitled to work in Canada?

Yes

No

Do you have any restrictions regarding hours or days of work?

Yes

No

If yes, please identify restriction(s): _____

Do you hold a valid Ontario driver license?

Yes

No

If yes, please identify all license(s) held: _____

Are you related to or have an employment connection with any member of the Municipalities or staff?

Yes

No

If yes, please identify Council or staff member and nature of connection: _____

Please review the Job Description for the Joint Fire Chief position then complete the following questions.

Is there anything that would prevent you from carrying out the duties, responsibilities and activities or from working in the conditions described?

- Yes
- No

Have you been convicted of a criminal offense for which you have NOT received a pardon?

- Yes
- No

If yes, please identify year and nature of conviction: _____

Check all types of work listed below that you have experience performing:

- | | | |
|--------------------------------|-----------------------------|-----------------------------|
| VFD Participation/Management | Health & Safety Compliance | Report Writing |
| Training - Planning & Delivery | Procurement Practices | General Management |
| Personnel Management | By-Law Review/Revision | Incident Reporting, Billing |
| Emergency Response | Interpret/Apply Legislation | Government Reporting |
| Incident Commander | Budget Preparation | Asset Management/Planning |
| EMPC/ Emergency Management | Municipal Operations | Conflict Management |
| FPPA/Building Code Inspections | Council Relations | Collaboration/Delegation |
| Public Education | Customer Service | Strategic Planning |

EDUCATION AND TRAINING:

1. Please list all secondary and post-secondary education and general training (excluding firefighting training) which you possess, including first aid, health and safety courses, equipment operation certificates or licenses, etc.

Name of School or Education/Training Organization	Highest Grade Successfully Completed or Course Name	Diploma or Certificate Earned	
_____	_____	Yes	No
_____	_____	Yes	No
_____	_____	Yes	No

2. Please attach a separate sheet(s) listing of all fire and/or emergency service training, certifications, accreditations and education which you possess.

3. If you have prior firefighter training which was grandfathered in by the OFMEM, please identify the fire department you were with when grandfathering was approved: _____

Please provide a copy of your grandfathering documentation spreadsheet.

EMPLOYMENT EXPERIENCE: *(attach an additional sheet if necessary)*

Employer	Position Held	From / To	Reason for Leaving
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REFERENCES:

Please provide a minimum of two work references, and at least one fire-related reference. Written references are welcome but contact information must be supplied.

Name	Organization/Company	Position/Title	Telephone Number
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OTHER:

Please list any other information that would help the Municipalities better understand your qualifications, experience and/or ability to perform the work listed in the job description *(attach additional sheets if necessary)*:

Please attach a covering letter which you have prepared yourself which states your pay expectations.

CERTIFICATION:

I certify that the information contained in this application, and any other form, related to my employment and experience is true and complete to the best of my knowledge. I understand that false statements may, at the sole option of Council, be grounds for disqualification or dismissal from employment, no matter when discovered. I authorize the references cited above to be contacted for this application process.

Date: _____

Signature: _____