

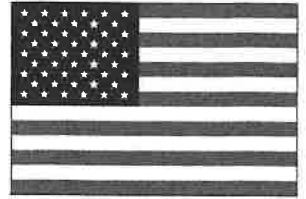


Cleon Township Fire Department

16505 Imhoff Drive, Copemish, MI 49625

"Pride of The Northeast"

Cleon Township is an equal opportunity employer and provider.



FIREFIGHTER AND FIRST RESPONDER

EMPLOYMENT APPLICATION

PLEASE PRINT:

DATE: _____

Name: _____ Driver's License No. _____

Address: _____ Social Security No. _____

City or Township: _____ Date of Birth (if under 18): _____

Phone No. (Home): _____ Position Applying for: _____

Phone No. (Work): _____

Make and Model of Vehicle: _____

Employer: _____

Normal Work Hours: _____ Agree to physical exam? (YES) (NO)

Can you leave work? (YES) (NO) Agree to driving record check? (YES) (NO)

Work weekends? (YES) (NO) Agree to criminal background check? (YES) (NO)

Emergency Contact: _____ Name of Physician: _____

Phone No. _____ Phone No. _____

Distance from your home to your assigned station: _____

The reason(s) I am applying for a membership in the Cleon Twp. Fire Department:

Any impairments (physical, mental, or other) that would prevent you from performing fire department duties? (YES) (NO) If 'yes' please explain.

NOTIFICATION TO JOB APPLICANTS

You are hereby notified and advised that you have 182 calendar days from this date to notify this employer in writing of any accommodations that you would need as the result of any physical handicap that you have in order to perform the job duties of the position for which you are applying.

A handicap includes:

- a) A physical or mental condition which is the result of disease, injury, congenital condition of birth, or functional disorder if it substantially limits one or more of your major life activities and which is unrelated to your ability to perform the duties of a particular job or is unrelated to your qualifications for employment or promotion;
- b) A history of such a physical or mental condition; or
- c) The condition of being regarded as having such a physical or mental condition.

A handicap does not include:

- a) a physical or mental condition caused by your CURRENT ILLEGAL use of a controlled substance; or
- b) a physical or mental condition caused by your use of liquor if that condition prevents you from performing the duties of your job.

A handicap is unrelated to an individual's ability if, without accommodation, the handicap does not prevent the individual from performing the duties of a particular job or position.

If you have a handicap, you are required to establish that you have made a written request for the accommodation within 182 days from this date, and that you could perform the duties of the position being applied for with that accommodation.

This notice is given to you on _____, and a copy with your signature is being filed along with your employment application.

Signature of Applicant

Witnessed

APPLICANT RELEASE FORM

I, _____, presently residing at,

_____, hereby

apply for membership/employment with the Cleon Township Fire Department. I have been advised and am fully aware that a representative of the fire department will be conducting a thorough investigation of my background to assist in determining my suitability for this employment. I realize that, in conducting this background investigation, representatives will be making inquires of the following personal institutions: Officials and Record Offices at schools which I have attended; Physicians and/or other persons who may have examined or treated me for any physical or other type of illness or injury; Police and/or court records with I may have an arrest or conviction record; employment history, and/or present and previous employers; and any other persons who may be able to provide information about me which the department deems necessary.

I hereby authorize and instruct any person or institution in possession of information about me to release same to the department. I hereby waive any privileged right which might otherwise forbid any physician, or other person who has attended to me or any other school official, court policy agency, employer, firm or person, from disclosing any information they have concerning me. I further consent that the Chief of the Department or his/her representatives be provided with a copy of any such records concerning me which they may desire.

I hereby give my consent to the department or it's designee to perform the test of my blood and/or urine to determine my possible usage of prohibited substances.

I recognize the right of the department, in it sole discretion, to treat all sources as confidential, and withheld from me and/or my agent the names of such confidential sources and information obtained therefrom.

Signature of Applicant

Date

CONDITIONAL OFFER OF EMPLOYMENT

I. PURPOSE

The purpose of this agreement is to extend to you, the applicant, a conditional offer of employment. You must meet the below listed terms and conditions before being hired by this department. A final offer of employment will be extended to you only after you have satisfied all the requirements established by this department. All entering applicants for the listed position of _____ are required to successfully comply with these same conditions.

II. PARTIES

This agreement between _____ (Department) and
_____ (Name)

S.S. # _____

III. TERMS AND CONDITIONS

A. Applicant must meet the following terms and conditions:

1. Comply with the minimum employment standards for Firefighter established by Department Policy, referred to as, Recruiting and Employment.
2. Successfully complete the minimum required training as mandated by the Michigan Firefighter's Training Council. Pursuant to (PA 291, of 1966) as amended to date. Pursuant to MCL 29.369 (5) and (6):
(A) Within 24 months after a person's appointment date as a volunteer or paid on-call service as a fire fighter, a person must pass part 1 of the examination to be eligible for continues volunteer or paid on-call service as a firefighter.
3. Be of sufficient medical condition, as determined by a medical history and examination, necessary to perform the essential functions of the above position.
4. Any additional requirements specified by the department, which may include; but not limited to:
 - a) Physical Agility Test
 - b) Criminal Background Screening
 - c) Physical Examination and Drug and Alcohol Screen
 - d) Having a valid Driver's License
 - e) Passing a Driving Skills Test
 - f) Driving Record Review
 - g) Facial hair is limited to moustaches only, no beards allowed
 - h) other (specify): _____

IV. LENGTH OF AGREEMENT

This conditional offer of employment shall remain valid in effect from the time after your 90 day probationary period, or as determined by department from the effective date of this agreement, provided however, this offer shall be immediately withdrawn upon the applicant's failure to meet ant one of the above terms and conditions. The effective date of this agreement is _____ (date).

ACKNOWLEDGEMENT

Successful completion of these job related and necessary conditions of employment is required to carry out the essential functions of the above position. I have read and agree to abide by the **CONDITIONAL OFFER OF EMPLOYMENT** and agree to abide by these terms.

Township Representative

Date

Applicant

Date

POLICY: RECRUITING AND EMPLOYMENT

I. PURPOSE

The purpose of this policy is to outline the procedures to be followed in recruiting and employment.

II. PROCEDURE

- A. This department is an equal opportunity employer. As such, all persons are eligible for employment without regard to race, color, creed, sex or national origin. Additionally, persons employed will not be subject to discrimination, harassment, or inappropriate treatment with respect to their race, color, creed, sex, national origin or disability as outlined in specific Federal and State, local laws and ordinances.
- B. The following steps shall be taken in examining an applicant's qualifications for employment.
1. The applicant shall complete a written fire department application.
 2. The applicant must provide proof of high school graduation or GED.
 3. All applicants shall complete a pre-employment process established by department.
 4. The applicants will be screened in the following areas:
 - a) criminal background
 - b) driver's license- *see below

* Any applicant that has accumulated more than two (2) civil infractions moving violations or has six (6) points on their driving record at the time of application will not be considered for employment. Once the accumulative points have fallen below six (6) the individual may reapply for employment.

Any applicant with one (1) drug or alcohol related driving conviction within the last two (2) years, or more than one (1) drug or alcohol related driving conviction within the last five (5) years, will not be considered for employment.

5. Applicants who successfully complete the initial pre-employment process will be offered a conditional offer of employment contingent upon the successful completion of the following:
 - a) Applicants will be referred for pre-employment physical examination and drug screen at a medical facility designated by the Fire Chief.
 - b) Applicants who successfully pass the pre-employment physical examination and drug screen will be referred for a pre-employment physical agility test.

The physical agility test will be a type as approved by the NFPA 1582 or comparable.

- c) Applicants will be subject to a background investigation, family interview (if applicable), and driving record review.
 - d) All persons employed as firefighters are required to successfully complete the State mandated training within the mandated time period. Pursuant to (PA 291, of 1966) as amended to date. Pursuant to MCL 29.369 (5) and (6):
(5) Within 24 months after a person's appointment date as a volunteer or paid on-call service as a firefighter, a person must pass part 1 of the examination to be eligible for continued volunteer or paid on-call service as a firefighter.
6. Applicants who successfully complete the pre-employment procedure as described above will be recommended for employment with the department.

III. CONDITIONS OF EMPLOYMENT

- A. All persons offered employment as a firefighter by the department are expected to attend 100% of all regularly scheduled training and respond to 80% of the calls for service. Failure to attend regularly scheduled training and respond to calls for service without an acceptable reason may result in termination of employment. Personnel are expected to keep the Fire Chief or designee apprised of all the hours during which they can be expected to be available for service. Personnel must immediately notify the Fire Chief of times when they will be unavailable for service due to personal circumstances such as, vacation, business trips, unusual family circumstances, illness, injury, or for any other reason.
- B. All persons employed as firefighters must maintain themselves in physical condition so as to be able to safely perform the duties of their position. All fire personnel must participate in and successfully pass periodic physical examinations as determined by the fire department.

I hereby agree that the information I provided in above is accurate, and agree that the fire department may verify such information including conducting background checks and obtaining a copy of my driving, criminal history and physical examination. I agree to the disclosure of such information to the fire department by any agency or person and releases any agencies or persons from any liability connected with such disclosures.

I further agree that if accepted for membership on this fire department I will obey all policies and procedures of the municipality, fire department, and all applicable statutes of the State of Michigan. I understand that membership on this fire department is on an at-will basis, and may be terminated by the municipality for any reason.

Applicant Signature

Interviewed by: _____

Fire Station Assigned: _____

Office Use Only

Date application received: _____ Date reviewed: _____

Approved YES () NO ()

Reasons: _____

Notes/Restrictions: _____

Background Check Performed by: _____ Date: _____

Approved by: _____ Date: _____