

Painesville Township Fire Department

550 Hardy Road
Painesville, Ohio 44077
(440) 579-0011

Applications process and requirements for Part-time Firefighter

Copies of the following along with a complete application including your signature are required for your application to be processed:

1. Ohio Drivers License- Painesville Township Firefighters MUST maintain the minimum level of auto insurance required by The State of Ohio, and must be insurable by Painesville Township's insurance company.
2. State of Ohio, Department of Public Safety Certificate:
 - EMT, or
 - Paramedic (include a copy of your ACLS card)
3. State of Ohio, Department of Public Safety Certificate: Firefighter Level II (240 Firefighting Class)
4. Current CPR Card
5. Haz-Mat Awareness: Certificate of Course Completion
6. Haz-Mat Operations: Certificate of Course Completion
7. Certificate of Completion of Firefighters Physical Agility Testing from Cuyahoga Community College
 - Contact Cuyahoga Community College at (216) 987-5063 for dates, times, and cost
 - Certification time MUST be four and ½ minutes (4.5) or less

The minimum emergency medical certification for consideration for employment is basic EMT. All certifications' that were current at the time of employment will be maintained while employed with the Painesville Township Fire Department. The department may provide financial assistance to Part-time employees in pursuing Paramedic certification. This funding is subject to the availability of grant monies and other financial limitations. Any employee wanting assistance will be required to sign an agreement of employment.

Steps in Hiring Process

1. Application submitted along with ALL other required information
2. A thorough check of references, past and present employers
3. If an employment offer is extended, it will be conditional pending the successful completion of the following:
4. Interviews with Fire Department officers
5. Employment will be confirmed by the Board of Township Trustees's
6. All part-time employees will be subject to a one year probationary period that may be extended at the request of the Fire Chief.

PAINESVILLE TOWNSHIP FIRE DEPARTMENT – EMPLOYMENT APPLICATION

PERSONAL HISTORY

 Name (Last, First, Middle) Home Phone (____) _____
 Pager (____) _____
 Work Phone (____) _____
 Cell Phone (____) _____

Address: _____ City _____ State _____ Zip _____

Social Security # _____ Email _____
 Lake County On-Line # _____ Additional On Line # _____ County _____

Are you prevented from lawfully becoming employed in the United States because of Visa or Immigration Status? Yes No

Have you ever served in the U. S. Armed Forces? Yes No

If Yes: _____
 Branch of service Type of discharge

Are you currently a member of the U. S. Reserves, National or State Guard Organization?

Yes No If Yes: _____
 Grade and Service # Service and Component

Please indicate reserve obligation, if any _____

EDUCATION

	Name Address	Course of Study	Diploma or Degree/Major
High School			
College/University			
Other			

Fire & EMS Training			
Training/Course Name	Location	Dates	Certification #/Expiration Date
Firefighter 240			
EMT or Paramedic			
ACLS			
CPR			
Hazmat Awareness			
Hazmat Operations			

Please attach listing of any additional training

EMPLOYMENT HISTORY

Please list all employers for the past five (5) years, beginning with your current employer.
 May we contact your current employer(s)? Yes No

Company Name-	Position	Dates of Employment	
Address	Supervisor:	From	To
	Responsibilities:		
Telephone: ()			
Company Name	Position	Dates of Employment	
Address	Supervisor:	From	To
	Responsibilities		
Telephone: ()	Reason for Leaving		
Company Name	Position	Dates of Employment	
Address	Supervisor:	From	To
	Responsibilities		
Telephone: ()	Reason for Leaving		
Company Name	Position	Dates of Employment	
Address	Supervisor:	From	To
	Responsibilities:		
Telephone: ()	Reason for Leaving:		
Company Name	Position	Dates of Employment	
Address	Supervisor:	From	To
	Responsibilities:		
Telephone: ()	Reason for Leaving:		

Have you ever been discharged or asked to resign from any employment? Yes No
 If yes, please state the circumstances:

Have you ever been convicted of a felony? Yes No
 If yes, please state the circumstances:

REFERENCES

Please list three (3) individuals, other than relatives, whom we may contact for a professional recommendation:

Name _____ Relationship to you: _____
Address: _____ City _____ State _____ Zip _____
Phone: _____ Years Known: _____

Name _____ Relationship to you: _____
Address: _____ City _____ State _____ Zip _____
Phone: _____ Years Known: _____

Name _____ Relationship to you: _____
Address: _____ City _____ State _____ Zip _____
Phone: _____ Years Known: _____

CERTIFICATION OF APPLICANT

I hereby certify that all information furnished in this application is true to the best of my knowledge and any misstatement of fact contained in this application may be sufficient cause for rejection of employment or termination.

I authorize any employer, branch of the armed forces, personal reference, school, department, agency, or organization as listed in this application to release any needed information to Painesville Township.

I understand that Painesville Township Fire Department considers all applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, veteran status, sexual orientation, or any other legally protected status.

I recognize that, should I be hired, my employment is "at-will". I will be free to resign my employment for any reason at any time, just as the Painesville Township Fire Department will be free to terminate my employment for any reason at any time.

Date

Signature of Applicant

FOR OFFICE USE ONLY:

DATE RECEIVED

APPLICATION RECEIVED BY
(PAINESVILLE TOWNSHIP FIRE DEPT MEMBER)