REEDSPORT VOLUNTEER FIRE DEPARTMENT
124 N. 4TH STREET
REEDSPORT, OR. 97467
541-271-2423
FAX: 541-271-1228
CHIEF TOM ANDERSON
reedsportvfd@cityofreedsport.org

FIREFIGHTER APPLICATION

The Reedsport Volunteer Fire Department is looking for local men and women who have the time and desire to help others in need. With the increasing number of fire and medical alarms, volunteers are needed to help keep the balance by providing quick, professional, fire and medical response.

REQUIREMENTS

For men or women who wish to be active firefighter volunteers, the following minimum qualifications must be met. Applicants must

- Be at least 18 years of age.
- Live within the fire district.
- Have a valid Oregon driver's license.
- Have the time to complete basic fire ground operations training.
- Pass a probationary period.

Applications may be obtained at the main Fire Station, 2680 Frontage Road, in Reedsport, Mon.-Fri., 8:00 am to noon. Applications will be reviewed by the Fire Chief, Department Officers, and our Associations Executive Committee.

TRAINING

The Fire Department is committed to the protection of lives, property, and the environment. Training is essential for firefighters. Being properly trained is vital for the safety of the volunteers and the community. Practice and training is on Monday nights each week. RVFD will train volunteers to response levels such as entry level basic firefighting before they are allowed to respond to emergencies. Additional advanced training is also available.

PLEASE TURN IN YOUR APPLICATION TO:

FIRE STATION 2 (MAIN STATION)
2680 FRONTAGE ROAD, REEDSPORT
Business hours 8:00 to noon, Monday to Friday

BENEFITS

Volunteers learn basic first aid and fire suppression knowledge to help protect the community. Members will be issued the necessary protective equipment. They are entitled to Workers Compensation and life insurance. A financial reimbursement is also provided.

The Fire Department is also looking for persons interested in the following non-fire suppression activities related to the fire service.

- Photography
- Weed abatement
- Hydrant maintenance and painting
- Webmaster, (to develop and maintain Fire Department web site)

FAMILY

Volunteers and their families become part of an extended family of emergency service providers and are included in all activities sanctioned by the Reedsport Volunteer Fire Department.

SIGN UP

Volunteers have always been, and continue to be, the heart of the critical response force for the community during any emergency situation. Without them the Fire Department would cease to exist.

We want you to join the Reedsport Volunteer Fire Department. We guarantee you will feel special for saving lives and protecting your neighbor's property. Feel free to stop by the station, take a tour, talk to a firefighter, or observe a Monday night drill. Don't forget to pick up an application. You'll be glad you did.

REEDSPORT VOLUNTEER FIRE DEPARTMENT

Application
For
VOLUNTEER FIREFIGHTER

The Fire Department makes decisions regarding volunteer applications without regard to race, color, gender, national origin, marital status, age, industrial injury, mental or physical handicaps, or any other protected classification unrelated to job performance.

Please fill out carefully using a ballpoint pen. If you need additional paper, you may attach extra sheets.

NAME: _____ DATE OF BIRTH: _____
First Middle Last

PHYSICAL ADDRESS: _____
Number and Street City State Zip

MAILING ADDRESS: _____
Number and Street or P.O. Box City State Zip

TELEPHONE: _____
Residence Work Cell

SOCIAL SECURITY NO: _____

EDUCATION: Circle the last grade you completed: 6 7 8 9 10 11 12 13 14 15 16

SPECIAL TRAINING: List any special training or certificates that might be related to the position:

_____

CURRENT EMPLOYER: Company Name: _____

Job Title: _____ Supervisors Name: _____ Phone: _____

Do you have any mental or physical condition that would substantially hinder or prevent the performance of this position? If yes, please explain in detail and indicate what accommodations, if any, would permit you to perform the duties in question:

_____

Have you ever been convicted of a felony? _____Yes _____No If yes, please give a short explanation outlining the circumstances of your conviction. Please indicate date, nature and place of offense, and final outcome. Convictions can disqualify candidates. _____

In submitting this application, I authorize investigation of all statements contained in it, and it is understood and agreed that any misrepresentation by me in this application or in any accompanying materials may result in the cancellation of the application and/or termination of my volunteer status. I understand my status as a Volunteer Firefighter will be contingent upon successfull completion of the Entry Level Firefighter Class, Hazardous Material Awareness Class, and six months probation with possible extension of probation.

In consideration of this position, I agree to conform to the rules and regulations of the Fire Department.

I certify that I have read this application and that the information I have provided is true and correct.

Signature: _____ Date: _____

Executive Committee:
Signatures: _____
_____
_____

REEDSPORT VOLUNTEER FIRE DEPARTMENT

IMPORTANT

Please read carefully and initial each paragraph before signing.

By my signature and initials below, I promise that the information provided in this application (and accompanying resume, if any) is true and complete. I understand that any false information may disqualify me from further consideration as to my volunteer status, and may be justification for dismissal from the RVFD, if discovered at a later date.

_____ Initials

I authorize the investigation of all statements contained in this application (and accompanying resume, if any). I also authorize the RVFD to contact my present employer (unless otherwise noted in this application form), past employers, and listed references.

_____ Initials

I authorize any person, school, a current employer (except as previously noted), past employers, and organizations named in the application form (and accompanying resume, if any), to provide the RVFD with relevant information and opinion that may be useful to the RVFD in making a decision on this application, and release such persons and organizations from any legal liability in making such statements.

_____ Initials

I understand that if my volunteer status is terminated by the RVFD for dishonesty, breach of trust, or any criminal acts, the authorities may be notified and I may be criminally prosecuted.

_____ Initials

I understand that this application does not, by itself, create a contract of volunteer status, and that MY MEMBERSHIP IN THE REEDSPORT VOLUNTEER FIRE DEPARTMENT IS FOR NO DEFINITE PERIOD OF TIME. I also understand that if I do not follow and conform to the rules and regulations of the, Reedsport Volunteer Fire Department, THE EXECUTIVE COMMITTEE AND/OR THE FIRE CHIEF MAY TERMINATE MY VOLUNTEER STATUS AS SET FORTH IN THE REEDSPORT VOLUNTEER FIRE DEPARTMENT ASSOCIATION BY-LAWS.

_____ Initials

RELEASE AND WAIVER

To whom it may concern:

I Request and authorize you to disclose to the Reedsport Volunteer Fire Department any documents or information that it may request. I have authorized the Reedsport Volunteer Fire Department to inquire concerning my background in connection with an application to be a volunteer for the RVFD. I agree to hold you and your agents and employees harmless from all liability, which could relate in any way to the disclosure of private information or any assessment or opinion of my suitability for volunteer status, which may be provided.

Date: _____ Signature: _____

REEDSPORT VOLUNTEER FIRE DEPARTMENT

DISCLOSURE AND RELEASE FORM
VOLUNTEERS DRIVING RECORD INFORMATION

1. In connection with my volunteer status, I hereby give permission to the Reedsport Volunteer Fire Department to obtain my state driving record (also known as my motor vehicle record or MVR).

2. I acknowledge and understand that my driving record is a consumer report that contains public record information.

3. I authorize, without reservation, any party or agency contacted by the RVFD, to furnish the above mentioned information.

4. I understand that I have the right to request a copy of my driving record and to know the source or sources of my driving record, for a two-year period preceding my request.

5. This authorization shall remain on file by the RVFD for the duration of my volunteer status and will serve as ongoing authorization for the RVFD to procure my state driving record at any tine during my volunteer status.

6. I understand that the RVFD may take adverse action affecting my volunteer status and/or my authorization to drive fire department vehicles, based on information in my driving record. If such adverse action is taken; I acknowledge that my rights are as follows:

   A) The RVFD must notify me in writing of any adverse action
   B) I have the right to receive a copy of the driving record upon which the adverse action was based.
   C) I have the right to receive a summary of my rights under the Fair Credit Reporting Act. I have the right to know the name, address, and phone number of the agency that provided my driving record to the RVFD.
   D) I have the right to obtain a free copy of my driving record from the agency that provided it, if such request is made within 60 days from the date that the RVFD took adverse action.
   E) I have the right to dispute the accuracy or completeness of my driving record with the agency that provided it and request that any errors be corrected.

_____ _____ _____

Volunteers Name (print) Volunteers Signature Date signed

_____ _____ _____

Social Security Number Drivers License Number & State Date of Birth

Year this driver obtained CDL License: ____ Years commercial driving experience: ____