

EDUCATION

17. **CIRCLE HIGHEST GRADE COMPLETED**

GED CERTIFICATE HIGH SCHOOL COLLEGE 1 2 3 4
GRADUATE SCHOOL M.A. Ph.D. OTHER

**Name and Address of School
(include City and State)**

Date(s) Attended

**Graduate ?
Yes No**

18. High School _____
19. Undergraduate Education _____
20. Graduate Education _____
21. Trade Schools _____
22. Paramedic School _____
23. EMT School _____
24. What college degrees have you attained? _____
25. List course work relevant to position for which you have applied: _____
- _____
- _____

MILITARY

26. Are you now or have you ever been in the military service? Yes ____ No _____
27. Branch of service _____
28. Are you now or were you ever an active member of any branch of the U.S. Military Reserve Forces or National Guard Unit? Yes _____ No _____
- Rank _____
29. Unit _____ From _____ To _____

CONVICTION HISTORY

30. Have you ever been convicted of a crime other than minor traffic violations?
Yes _____ No _____

36. **Employer's name** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____
month-year month-year

37. Have you ever been suspended or terminated, other than from an economic layoff, from any prior employment? Yes ____ No ____ If yes, please explain:

38. Have you ever resigned from any employment position because of misconduct or unsatisfactory performance or while under investigation? Yes _____ No _____

If yes, explain: _____

39. Have you ever taken a firefighter examination or any other civil service examination?
Yes _____ No _____

Agency _____ Date _____ Position on List _____

Status _____

40. Are you currently on any eligibility list(s)? Yes _____ No _____

If yes, indicate position applied for, status on list, and expiration date of each: _____

REFERENCES

Please list three (3) adults not related to you and not former employers, who have known you for more than three (3) years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality, and other qualities.

41. Name _____ Address _____

Home Phone _____ Business Phone _____

Occupation _____ Relationship _____

42. Name _____ Address _____
Home Phone _____ Business Phone _____
Occupation _____ Relationship _____

43. Name _____ Address _____
Home Phone _____ Business Phone _____
Occupation _____ Relationship _____

44. List organizations of which you are a member that relate to the position for which you are applying:

45. Explain your reasons for wanting to become a firefighter: _____

46. Please review the enclosed job description for the position for which you are applying and state whether you can perform the essential job functions listed therein with or without reasonable accommodation.
Yes _____ No _____

47. If accommodation is needed, please explain: _____

48. Person(s) to be notified in case of emergency.
Name _____ Address _____
Phone _____ Relationship _____

Name _____ Address _____

Phone _____ Relationship _____

Name _____ Address _____

Phone _____ Relationship _____

SUBMISSION OF DOCUMENTATION AND CREDENTIALS

49. I understand that if I am placed on any eligibility list, I will be fingerprinted, and a set of my fingerprints will be furnished to the Illinois Department of State Police and to the Federal Bureau of Investigation.
50. I understand that I must provide the Board of Fire Commissioners with COPIES of the following documentation and/or certifications at the times indicated below. Other relevant fire service certificates, such as Firefighter III, Hazardous Materials I or II, may be submitted with the application but are not required. If at any time any of the documentation is updated or if my credentials change, I must submit the new documentation or certifications to the Commission as soon as possible. I further understand that failure to submit any of the following documentation and/or certifications at the times indicated may result in my application no longer being considered by the Commission and/or loss of my position on the eligibility list or withdrawal of a conditional offer of hire.

DOCUMENTATION

TIME OF SUBMISSION

North Palos Fire Protection District Authorization Form	With this application
Firefighter II Certification	With this application
EMT – Paramedic Certification Licensed from State of Illinois	With this application
Proof of passage of Candidate Physical Ability Test (CPAT) With ladder certification	With this application
Copy of High School or GED diploma (Do not send college certificates as substitutes)	With this application
Set of Fingerprints	After eligibility register is created but before a conditional offer of hire
Valid driver's license	With this application
One of the following:	With this application
- Birth certificate issued by the State Department, Form FS-545	
- Birth certificate issued abroad by the State Department, Form DS-1350	
- Original or certified copy of a birth certificate issued by a state, county, or municipal authority, bearing a seal	
- Native American tribal documents	
- U.S. citizen identification card, INS Form 1-197	
- Identification card for use of a resident citizen in the U.S., INS Form 1-179	

I HEREBY CERTIFY THAT I HAVE READ THE ABOVE QUESTIONS AND STATEMENTS, AND I CERTIFY THAT THERE ARE NO MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS IN THIS QUESTIONNAIRE, AND THAT ALL MY ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT MISREPRESENTATIONS, OMISSIONS OR FALSIFICATIONS ON THIS QUESTIONNAIRE OR AT ANY TIME DURING THE HIRING PROCESS MAY RESULT IN MY APPLICATION NO LONGER BEING CONSIDERED OR IN TERMINATION OF MY EMPLOYMENT WITH THE NORTH PALOS FIRE PROTECTION DISTRICT.

Dated at _____ Illinois, this _____ day of _____, 20____.

Signature in Full _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. This organization is committed to the policy of equal employment opportunity in recruitment, hiring, career advancement, and all other personnel practices. Your job related experience and other qualifications will be considered without discrimination on the grounds of race, color, religion, sex, national origin, age, or physical or mental handicap. All information provided in this application will be treated confidentially and will be used only to help assure the best use of your abilities if you are employed with us.

**NORTH PALOS FIRE PROTECTION DISTRICT
AUTHORIZATION FORM**

I, _____, hereby authorize the NORTH PALOS FIRE PROTECTION DISTRICT and its agents, employees or representatives to obtain and to use all information relating to my previous and current employment, education, military record, criminal conviction history, personal characteristics, and all other information which may bear favorably or unfavorably upon my application for employment made to the NORTH PALOS FIRE PROTECTION DISTRICT. I also consent to the release to the NORTH PALOS FIRE PROTECTION DISTRICT of any and all medical records prepared during the physical examination I am required to undergo for employment with the NORTH PALOS FIRE PROTECTION DISTRICT. I further release from liability any person or persons providing or receiving any such information in connection with this pre-employment investigation.

I understand that I will undergo a job task test as part of the application process and that such job task test shall subject me to vigorous physical exercise. I further understand that I should be in appropriate physical condition before performing the test and that I must submit the NORTH PALOS FIRE PROTECTION DISTRICT CERTIFICATION OF SAFE PARTICIPATION IN JOB TASK TEST form prior to participating in the job task test.

I also agree to indemnify and hold harmless the NORTH PALOS FIRE PROTECTION DISTRICT, the Board of Fire Commissioners of the NORTH PALOS FIRE PROTECTION DISTRICT, the individual trustees and commissioners, employees and agents against any claim or loss whatsoever, including but not limited to attorneys' fees and any cost of defense which arises directly or indirectly out of any injury which I might sustain in the job task test and/or application process. I also covenant that for the consideration of my application, I agree not to sue the NORTH PALOS FIRE PROTECTION DISTRICT, the individual trustees and commissioners, employees and agents for any injury, loss or damage as a result of such process including but not limited to personal injury, wrongful death, court costs, attorneys' fees and interest, in any manner caused directly or indirectly, including the negligent acts or omissions of the NORTH PALOS FIRE PROTECTION DISTRICT, its trustees and commissioners as well as its employees and agents.

I hereby acknowledge and agree that as a condition of employment with the NORTH PALOS FIRE PROTECTION DISTRICT, I must maintain at all times a valid State of Illinois driver's license, of the class required to operate all vehicles of the NORTH PALOS FIRE PROTECTION DISTRICT. I do further agree that my failure to maintain said driver's license will constitute reason for withdrawal of a conditional offer of hire or just cause for my dismissal from employment with the District. At time of hire, I must qualify for, obtain, and maintain at all times a valid State of Illinois Firefighter II certification. I do further agree that my failure to obtain and maintain the requisite certifications will constitute reason for withdrawal of a conditional offer of hire or just cause for my dismissal from employment with the District.

Signature _____

SUBSCRIBED and SWORN to
before me this _____ day of
_____, 20__.

Notary Public

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. This organization is committed to the policy of equal employment opportunity in recruitment, hiring, career advancement, and all other personnel practices. Your job related experience and other qualifications will be considered without discrimination on the grounds of race, color, religion, sex, national origin, age, or physical or mental handicap. All information provided in this application will be treated confidentially, and will be used only to help assure the best use of your abilities if you are employed with us.

FORM D

NORTH PALOS FIRE PROTECTION DISTRICT PREFERENCE POINTS FOR FIREFIGHTER CANDIDATES

After the Initial Eligibility Register is created, candidates who are eligible for preference points may submit a claim for these points in writing to the Board of Fire Commissioners on its standard form. This claim must be made within ten (10) days after the posting of the Initial Eligibility Register or the points will be deemed waived. Applicants may claim up to three (3) types of preference points:

1. **Experience Preference Points (maximum 5 points)**

Any applicant who has been a paid-on-call or a part-time certified Firefighter II, Firefighter III, EMT-B, or EMT-P for the North Palos Fire Protection District shall be awarded one-half point for each year of successful service, up to a maximum of five (5) points at the time of the posting of the initial eligibility register.

Any applicants from outside the North Palos Fire Protection District who were employed as full-time certified firefighters or paramedics for at least two (2) years at another fire protection district or municipality shall be awarded one (1) point for each year up to a maximum of five (5) points. No experience preference points will be awarded to applicants for service with a private employer who had a contract for fire or ambulance service with another fire protection district or municipality.

Proof of such service must include submission of copies of applicable certificates and a sworn affidavit signed by the applicant (see attached **Form E**). Note that proof of paid-on-call or full-time service may be verified by the District. Also note that an applicant may not receive experience preference points for a certificate if the amount of points awarded would place the applicant before a veteran on the eligibility register. Finally, no person shall be awarded more than the maximum of five (5) points for experience.

2. **Veteran's Preference Points (maximum 5 points)**

Applicants who served in the United States military actively for at least one (1) year and who were honorably discharged or are now on inactive or reserve duty shall receive five (5) points. Proof of prior service must include a copy of Military Form DD-214 (long form) as proof of active service, evidence of the honorable discharge, and a sworn affidavit signed by the applicant.(see attached **Form E**) Proof of current inactive or reserve service must include the applicant's most recent Leave and Earnings Statement (LES).

3. **Educational Preference Points (maximum 2.5 points)**

Applicants who have successfully obtained an associate's degree in the field of fire service or emergency medical services, or a bachelor's degree from an accredited college or university shall receive two and a half (2.5) points. A certified transcript must be included with the request for preference points as proof of the attainment of degree.

4. **Residency Preference Points (70 ILCS 705/16.06b(h)(6)) (Max. 2.5 Points)**

Applicants who have maintained their principal personal residence within the boundaries of the North Palos Fire Protection District for the 24 months preceding the time of application shall receive two and a half (2.5) preference points. Proof of residency must be shown in order to obtain the points.

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FORM E

**NORTH PALOS FIRE PROTECTION DISTRICT
PREFERENCE POINT CLAIM FORM AND AFFIDAVIT**

If you wish to claim preference points for the Final Eligibility Register for hire with the North Palos Fire Protection District, please complete the following form and submit it with any required attachments within ten (10) days after the posting of the Initial Eligibility Register. Failure to submit the request within ten (10) days shall be deemed a waiver of the points.

A. Experience Preference Points (70 ILCS 705/16.06b(h)(5)) (Max. 5 points)

Please state the relevant dates of successful service in the following capacities and attach Firefighter II, Firefighter III and/or EMT Certificates; do not include employment with any private company or service even if that employment provided service to a fire district or municipality.

**1. North Palos Fire Protection District
Part-time Firefighter and/or EMT**

Date of Service (month/date/year): _____ to _____

OSFM Certification Dates (month/date/year):

FF II / BOF: _____ FF III / AFT: _____

EMT-B: _____

EMT-P: _____

2. Full-time Firefighter and/or Paramedic-Another Fire Department

Name of Department/District: _____

Address: _____

Phone Number: _____

Date of Service (month/date/year): _____ to _____

Name of Department/District: _____

Address: _____

Phone Number: _____

Date of Service (month/date/year): _____ to _____

B. Veteran's Preference Points (70 ILCS 705/ 16.06b(h)(1)) (Max. 5 points)

Please state the following information regarding your military service and attach form DD-214 (long form) and proof of honorable discharge, or most recent Leave and Earnings Statement (LES) if you are still serving and have no DD-214:

Branch of Service: _____

Unit: _____

Rank: _____

Date of Service (month/date/year): _____ to _____

Date of Honorable Discharge: _____

C. Educational Preference Points (70 ILCS 705/16.06b(h)(3))(Max. 2.5 points)

Please state the following information regarding your educational background and attach copies of certified transcripts as proof of the attainment of a degree:

College Attended: _____

Dates of Attendance (month/date/year): _____ to _____

Degree Awarded: _____

College Attended (if applicable): _____

Dates of Attendance (month/date/year): _____ to _____

Degree Awarded: _____

D. Residency Preference Points (70 ILCS 705/16.06b(h)(6))(Max. 2.5 points)

Please provide your primary resident address and attach at least two documents that indicate proof of your residence within the boundaries of the North Palos Fire Protection District:

Home Address: _____

Length of Residence at this Address: _____

Description of Proof Submitted: _____