



Pemberton Fire Rescue Paid-On-Call Firefighter Application Package



Job Description

Under the direction of the Fire Chief and Senior Officers, you will be responsible for skilled firefighting work involving the combating, extinguishing and prevention of fires; emergency medical care and treatment; rescue of victims from various emergency situations including motor vehicle incidents, mitigation of hazardous materials incidents; and saving life and property. The role involves performing routine duties related to the maintenance of firefighting equipment and departmental property, attending regular training and public education events.

Responsibilities:

- Respond to emergencies including but not limited to; fires, rescues, public assistance, emergency medical incidents, and spills or leaks of hazardous materials;
- Remain calm and professional in emergency situations;
- Operate fire apparatus and equipment;
- Work for extended periods of time in difficult and potentially hazardous situations;
- assist, when required, with cleaning and preparing equipment, and maintenance of personal equipment;
- Attend weekly training meetings and other training as required;
- Take part in public events and public education;
- Other assigned duties as required.

Minimum Entrance Qualifications:

- Canadian Citizenship or Permanent Resident. .
- Must be in good physical condition and able to successfully complete a physical agility test.
- Hearing must be normal without aids.
- Vision – Must be at least 20/30 unaided, and must be able to define recognizable colour groups.
- Must live within 8 km of the Village of Pemberton at time of application (Up to the Ryan River Bridge on the Pemberton Meadows Road or up to the Pemberton Industrial Park)
- Possess a satisfactory criminal record check that will not hamper one's ability to obtain a First Responder's Medical License.
- Possess and maintain valid Class 5 BC Driver's License.

Required time commitment:

- Must meet and be able to maintain minimum attendance for both practices and incidents as per Pemberton Fire Rescue's Operational Guidelines.
- Able to attend weekly Fire Practice and additional training as required.
- Able to attend incidents.
- Able to attend Public Education events and other fire department related events as requested.



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Please carefully consider these questions to decide if being a volunteer Firefighter is the right choice for you:

1. Do I make ethical and responsible choices in my day-to-day life and at work?
2. Have I taken part in any unlawful activities in the past three years that could affect the result of a Criminal Record Check?
3. Do I treat others with respect, dignity and professionalism at all times regardless of their circumstances?
4. Do I work effectively as part of a team?
5. To the best of my knowledge, am I physically and mentally able to perform the duties of a Firefighter?
6. Many recruits have had to withdraw their applications due to priorities in their personal lives – am I sure, my personal commitments can allow the necessary time commitment?
7. Am I able to work for extended periods under difficult and potentially hazardous situations?
8. Am I able to perform duties effectively in confined spaces, at heights, and with limited visibility?
9. Do I have the ability to remain calm and professional in emergency situations involving extreme stress and distraught persons?
10. Do I have substance abuse issues or compulsive behaviours that might be exacerbated by the stress involved in performing the duties of a Firefighter?
11. Do I have an adequate personal support system in place to assist me in handling the stress that I may encounter as a Firefighter?
12. Do I have the ability to motivate others and myself even in difficult situations?
13. Am I prepared to take orders from superiors and to carry out complex instructions?
14. Do I have any outside business activities or potential conflicts of interest that might compromise my ability to perform properly the duties of a Firefighter?
15. Have I actively supported my community and the interests of others?



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Section A: Name And Contact Information

First Name		Last Name					
Home Address (PO Box, Street, City, Province, and Postal Code)							
Home Phone:		Cell Phone:					
Email Address:							
Are you a Canadian Citizen / Permanent Resident			<table style="width: 100%; border: none;"> <tr> <td style="width: 25%; text-align: center;">YES</td> <td style="width: 25%;"></td> <td style="width: 25%; text-align: center;">NO</td> <td style="width: 25%;"></td> </tr> </table>	YES		NO	
YES		NO					

Section B: Basic Requirements

Do you currently live within the Village of Pemberton boundaries?	YES		NO	
Do you currently work in Pemberton?	YES		NO	
Are you 19 years of age or older?	YES		NO	
Do you believe you are free of medical conditions that may preclude your participation as a volunteer firefighter?	YES		NO	
Have you attached a criminal record check completed within the past 6 months? <i>(note: if you have a criminal record you will be asked to provide details) If you do not have a recent criminal record check document please do not proceed with requesting one until advised to do so by the fire department.</i>	YES		NO	
Do you have a current BC class 5 Non-Restricted driver's license? <i>If 'yes,' please attach an abstract and a photocopy of your Driver's License. If you have ever had your license suspended, please attach a note with an explanation.</i>	YES		NO	
Air Brakes Endorsement:	YES		NO	

SECTION C: Availability

Are you willing and able to participate in a minimum of one 3 hour practice session every week and maintain a minimum attendance rate of 75% or greater?	YES		NO	
Do you understand that in order to be available for emergency call-outs, you must be able to arrive at the fire station promptly and have abstained from alcohol and drugs for the previous 12 hours?	YES		NO	
Are you willing and able to retain and wear an emergency pager and respond to emergencies 24 hours per day, seven days per week, 365 days per year?	YES		NO	
Are you willing and able to participate in the occasional weekend training program	YES		NO	



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SECTION D: Employment History

Are you currently employed?				YES		NO	
Current Employer:							
Position Title:				Years Held:			
Address:							
Responsibilities:							
Have you attached a current resume?				YES		NO	
Have you discussed your application to Pemberton Fire Rescue with your employer?				YES		NO	
If yes, does your employer consent to you responding to emergencies during business hours?				YES		NO	
Previous Employer:							
Position Title:				Years Held:			
Address:							
Responsibilities:							
Reason for leaving:							

SECTION E: EDUCATION AND TRAINING

Did you complete high school				YES		NO	
Do you have any post-secondary education? <i>If 'yes', please describe:</i>				YES		NO	
Please place a check mark next to any of the following training you have completed, and attach photocopies of current certificates:							
FIREFIGHTING		<i>Explain:</i>					
RESCUE		<i>Explain:</i>					
FIRST AID		<i>Explain:</i>					
OTHER		<i>Explain:</i>					



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SECTION F: WILLINGNESS

Do you understand that volunteer firefighters are expected to be in good physical condition, and do you feel you are physically able to participate in a physical fitness-related test as part of the selection process?	YES		NO	
Do you understand that successful applicants are required to remain without facial hair to ensure a self-contained breathing apparatus mask will form a positive seal on the face? (Moustache and short side burns are acceptable as long as they don't affect the seal)	YES		NO	

SECTION G: REFERENCES

Is it permissible for fire hall personnel to contact your current employer as a reference? If 'no', please explain:	YES		NO	

REFERENCE #1

First Name		Surname	
Title		Company name	
Address (number, street, city, province, postal code)			
Phone:		Cell phone:	
Email address:		Relationship to you:	

REFERENCE #2

First Name		Surname	
Title		Company name	
Address (number, street, city, province, postal code)			
Phone:		Cell phone:	
Email address:		Relationship to you:	



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REFERENCE #3			
First Name		Surname	
Title		Company name	
Address (number, street, city, province, postal code)			
Phone:		Cell phone:	
Email address:		Relationship to you:	

Fitness Test

All Candidates must successfully complete the Pemberton Fire Rescue Fitness Test as described below:

- The physical agility test is to see how the candidate performs physical components based on a validated maximum total time of 10:00 minutes.
- Throughout testing, the candidate will wear comfortable exercise style clothing.
- All testing stations were designed to obtain the necessary information regarding physical ability. The tools and equipment were chosen to provide the highest level of consistency, safety and validity in measuring the candidate's physical abilities.
- The events are placed in a sequence that best simulates fire scene events. To ensure the highest level of safety, no running is permitted.
- Any participant may be stopped from performing if it looks to be an unsafe act on the participant's part. A two (2) minute penalty will be added if this occurs.
- All candidates must complete the PAR-Q and, if required, obtain permission from a physician to participate.

PAR-Q & YOU

(A Questionnaire for People Aged 15 to 69)

Regular physical activity is fun and healthy, and increasingly more people are starting to become more active every day. Being more active is very safe for most people. However, some people should check with their doctor before they start becoming much more physically active.

If you are planning to become much more physically active than you are now, start by answering the seven questions in the box below. If you are between the ages of 15 and 69, the PAR-Q will tell you if you should check with your doctor before you start. If you are over 69 years of age, and you are not used to being very active, check with your doctor.

Common sense is your best guide when you answer these questions. Please read the questions carefully and answer each one honestly: check YES or NO.

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	1. Has your doctor ever said that you have a heart condition <u>and</u> that you should only do physical activity recommended by a doctor?
<input type="checkbox"/>	<input type="checkbox"/>	2. Do you feel pain in your chest when you do physical activity?
<input type="checkbox"/>	<input type="checkbox"/>	3. In the past month, have you had chest pain when you were not doing physical activity?
<input type="checkbox"/>	<input type="checkbox"/>	4. Do you lose your balance because of dizziness or do you ever lose consciousness?
<input type="checkbox"/>	<input type="checkbox"/>	5. Do you have a bone or joint problem (for example, back, knee or hip) that could be made worse by a change in your physical activity?
<input type="checkbox"/>	<input type="checkbox"/>	6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?
<input type="checkbox"/>	<input type="checkbox"/>	7. Do you know of <u>any other reason</u> why you should not do physical activity?

If
you
answered

YES to one or more questions

Talk with your doctor by phone or in person BEFORE you start becoming much more physically active or BEFORE you have a fitness appraisal. Tell your doctor about the PAR-Q and which questions you answered YES.

- You may be able to do any activity you want — as long as you start slowly and build up gradually. Or, you may need to restrict your activities to those which are safe for you. Talk with your doctor about the kinds of activities you wish to participate in and follow his/her advice.
- Find out which community programs are safe and helpful for you.

NO to all questions

If you answered NO honestly to all PAR-Q questions, you can be reasonably sure that you can:

- start becoming much more physically active — begin slowly and build up gradually. This is the safest and easiest way to go.
- take part in a fitness appraisal — this is an excellent way to determine your basic fitness so that you can plan the best way for you to live actively. It is also highly recommended that you have your blood pressure evaluated. If your reading is over 144/94, talk with your doctor before you start becoming much more physically active.

DELAY BECOMING MUCH MORE ACTIVE:

- if you are not feeling well because of a temporary illness such as a cold or a fever — wait until you feel better; or
- if you are or may be pregnant — talk to your doctor before you start becoming more active.

PLEASE NOTE: If your health changes so that you then answer YES to any of the above questions, tell your fitness or health professional. Ask whether you should change your physical activity plan.

Informed Use of the PAR-Q: The Canadian Society for Exercise Physiology, Health Canada, and their agents assume no liability for persons who undertake physical activity, and if in doubt after completing this questionnaire, consult your doctor prior to physical activity.

No changes permitted. You are encouraged to photocopy the PAR-Q but only if you use the entire form.

NOTE: If the PAR-Q is being given to a person before he or she participates in a physical activity program or a fitness appraisal, this section may be used for legal or administrative purposes.

"I have read, understood and completed this questionnaire. Any questions I had were answered to my full satisfaction."

NAME _____

SIGNATURE _____

DATE _____

SIGNATURE OF PARENT _____

WITNESS _____

or GUARDIAN (for participants under the age of majority)

Note: This physical activity clearance is valid for a maximum of 12 months from the date it is completed and becomes invalid if your condition changes so that you would answer YES to any of the seven questions.



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SECTION I: SIGNATURE

Please read carefully:	Please Initial		
I, the undersigned, apply to enroll as a volunteer recruit member of the Fire Department and, if accepted, undertake to perform such duties as may be assigned to me by the Fire Chief or his delegated representative.			
I understand the promotional opportunities will depend upon positions becoming available, the results of work performance, training evaluation, the recommendation of the Fire Officers and approval of the Fire Chief.			
I verify that the information contained on this application form is true and accurate.			
I hereby give consent to the Pemberton Fire Rescue to conduct verification of the information given, as required.			
I confirm that my application is completed truthful and correctly, additionally, I agree to abide by the rules, regulations, policies, procedures, guidelines, and bylaws that govern the Pemberton Fire Rescue Department, the Village of Pemberton, and Its Members.			
Signature		Date	

SECTION H: Attachments Checklist

Please remember to attach any documents	
	<i>Current BC Driver's License abstract with photocopy of your Driver's Licence If you have ever had your license suspended, please attach a note to explain</i>
	<i>Criminal record check and explanation (if applicable)</i>
	<i>Current certificates for firefighting, rescue or first aid training</i>
	<i>Your resume</i>
	<i>Information regarding any disabilities you have that may require accommodation</i>
	<i>A completed Application Form</i>
	<i>A completed PAR-Q and, if necessary, a letter from your physician stating your ability to perform the Fitness Test</i>