



Smith Valley Fire Department
3496 Highway 2 West
Kalispell, MT 59901

Application to be a Volunteer Firefighter

- The Smith Valley Fire District requires a criminal background check as well as a driving history. These are paid for by the District. Please scan and email your application to admin@smithvalleyfd.org or mail to 3496 Highway 2 West Kalispell, MT 59901. **Please provide a copy of your Driver's License.**

Name: _____

Address: _____

City: _____

Zip Code: _____

Home Phone: _____

Work Phone: _____

Mobile Phone: _____

E-mail: _____

1. Are you legally authorized to work in the U.S.? YES _____ NO _____

2. If selected, can you provide proof that you are at least 18 years of age?

YES _____ NO _____

3. Do you have any physical or health limitations that could interfere with your performance with the volunteer position you are applying for?

YES _____ NO _____ (NOTE: Employment is contingent on applicant meeting minimum physical/mental demands of the position. Some positions need no physical demands)

If you answered yes, please explain:

4. Do you have any commitments or responsibilities that might prevent you from meeting our weekly training requirements?

YES _____ NO _____ if yes, please explain:

Smith Valley Fire District Volunteer Application

5. Do you have any relatives on the Fire Department? YES _____ NO _____

If yes, who? _____

6. Have you previously applied for this position? YES _____ NO _____ If you answered yes, when did you apply? _____

7. Have you ever Volunteered for a Montana fire department or been an employee of the state?
YES _____ NO _____ If you answered yes, when and in what department did you work for?

8. Other Firefighter or EMS training:

Education and Training

1. High School: _____

Did you graduate? YES _____ NO _____ GED _____

Number of Years Attended _____

2. College/Trade School: _____

Subject Major: _____

Did you earn your degree? YES _____ NO _____

3. Please list any skills which you feel relate to this position:

4. _____

Background and Driving Record Check

NOTE: The existence of a criminal record will automatically disqualify you from volunteering with the Smith Valley Fire District; a DUI history on your driving record is a disqualification as well.

1. Have you ever been convicted as an adult of a felony? YES _____ NO _____

If yes, date and place: _____

Nature of offense: _____

Disposition: _____

2. Do you agree to a criminal record check?

YES _____ NO _____

3. Do you agree to a driver's license record check? YES _____ NO _____

Driver's license number: _____

Social Security Number: _____

4. Do you have truck driving experience? YES _____ NO _____

Type of vehicle: _____

Driver's license class – A, B, C: _____

Endorsements: _____

Availability and Employment History

1. What hours are you available to respond to emergency calls?

Approximate minutes from home to Fire Station 91: _____

Approximate minutes from work to Fire Station 92: _____

2. Can you be available for the following meetings and training sessions?

Tuesdays, 6:30-8:30 p.m. YES _____ NO _____

3. Do you have or an interest to attend a First Responder or EMT course?

YES _____ NO _____

Employment:

4. Present or Most Recent Employer: _____

Supervisor's Name: _____

Address: _____

Phone: _____

Job Title: _____

Date Employed: _____

Total Years Employed: _____

Working Hours: _____

Specific Duties: _____

Does business take you out of town? YES _____ NO _____ If yes, please explain normally what hours are you out of town:

May we contact your employer? Yes _____ NO _____

5. Please list your Military Service if applicable:

Branch of Service: _____

Reserve Status: _____

Attendance requirements if in the Reserve or Guard:

6. Any mechanical, electrical or other specialized work experience?

YES _____ NO _____ if so, please explain:

7. References—please list three references that are not related to you.

1. Name: _____

Address: _____

Phone: _____

2. Name: _____

Address: _____

Phone: _____

3. Name: _____

Address: _____

Phone: _____

Smith Valley Fire District Acknowledged Requirements:

I acknowledge and understand that application to become an Employee, a Volunteer Firefighter or EMS Provider with Smith Valley Fire District requires the following commitment: Selected applicants will be subjected to a 12 month probationary period with a review after 180 days with the Fire Chief and an Officer. Volunteer members will be issued PPE/gear after 4 consecutive trainings have been attended. The member's gear will be kept at station 91 and may respond to station 91 for crew assignment from the Fire Chief, Officer, or a senior firefighter.

The following must be **completed or accomplished** during the first 180 days of probationary period:

1. Pass a background and driving history check within 30 days of application.
2. Pass a physical work performance test (Wildland Pack Test)
3. Attend weekly meetings and drills (Tuesday of each week @ 1830, if unable to attend the member must contact the Fire Chief prior to the start of the training. If a probationary member has more than 2 unexcused absences the member will be dropped from cadency.)
4. Mustaches are permitted, but must be kept neatly trimmed, off of the top of the lip, and cannot extend beyond the corner of the mouth, (Due to safety concerns during fire operations beards are **not** allowed for individuals wishing to participate in structure fire operations including driver/operators), maintain proper hygiene, as well as professional attire.
5. Attend functions of Smith Valley Fire. There will be additional training required after becoming an active member of Smith Valley Fire District.
6. Provide proof of Liability insurance on private vehicle within 90 days of application and current registration.
7. Provide two forms of ID. (Passport, driver's license, military, SS card)
8. A probationary member will not drive any Smith Valley Fire equipment or apparatus until approved by the Fire Chief.
9. All equipment checked out will be your responsibility to care for and will be returned when the membership in ended. Any equipment not returned will be the member's responsibility to reimburse or replace.
10. A probationary member will complete a Probationary Firefighter Taskbook no later than by the 180 day review with the Fire Chief.
11. Smith Valley Fire District reserves the right to perform random drug testing on all members.

Being a firefighter or EMS provider is an emotionally challenging job and provides you with self-respect and self-satisfaction. Firefighting and providing prehospital care requires training and demands team effort and respect from each individual member in the Department.

I have read these requirement and have agreed to them.

Applicants Signature: _____ Date: _____

Fire Chief: _____ Date: _____

Background checks are paid for by Smith Valley Fire District.

DISCLOSURE AND AUTHORIZATION FORM TO OBTAIN CONSUMER REPORTS FOR EMPLOYMENT PURPOSES

Please Read Carefully Before Signing the Authorization

DISCLOSURE

In considering you for employment and, if you are employed, in considering you for subsequent promotion, assignment, reassignment, retention, or discipline, SMITH VALLEY FIRE DISTRICT (“the Company”) may request and rely upon one or more consumer reports or investigative consumer reports about you that we obtain from a consumer reporting agency, such as IntelliCorp Records, Inc.

IntelliCorp Records, Inc. can be contacted by mail at 3000 Auburn Dr, Suite 410; Beachwood, OH 44122; or phone: 1-888-946-8355; or website: www.intellicorp.net.

For explanation purposes:

- a “consumer report” is a written, oral or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in making an employment-related decision about you. Such information may include, for example, credit information, criminal history reports, or driving records; and
- an “investigative consumer report” is a consumer report in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your prior employers, neighbors, friends, or associates, or with others who may have knowledge concerning any such items of information. In the event an investigative consumer report is requested about you, you are entitled to additional disclosures regarding the nature and scope of the investigation requested, as well as a written summary of your rights under the Fair Credit Reporting Act (“FCRA”).

Under the FCRA, before the Company can obtain a consumer report or investigative consumer report about you for employment purposes, we must have your written authorization. Before we take adverse action on the basis, in whole or in part, of information in that report, you will be provided a copy of that report, the name, address, and telephone number of the consumer reporting agency, and a summary of your rights under the FCRA.

AUTHORIZATION

I have read and understand the foregoing Disclosure, and authorize **SMITH VALLEY FIRE DISTRICT** to obtain and rely upon consumer reports or investigative consumer reports in considering me for employment and, if I am employed, in considering me for subsequent promotion, assignment, reassignment, retention, or discipline. By my signature below, I authorize the Company to obtain any such reports and to share the information received with any person involved in the employment decision about me.

I do _____ do not _____ authorize you to contact *my current* employer for Employment and Reference Verifications

(This will authorize immediate inquiries to the Fire Chief and to any listed supervisors or references in the Employment/Reference Section of your application.)

I also agree that this Disclosure and Authorization in original, faxed, photocopied, or electronic (including electronically signed) form will be valid for any consumer reports or investigative consumer reports that may be requested about me by or on behalf of the Company.

Printed Name

Applicant Signature

Date

Parent or Legal Guardian Signature
(for searches conducted on minors under
the age of 18)

Date

Personal Data

_____	_____	_____	
Last Name	First Name	Middle Name	
_____			Current
Address		Dates Lived Here	
Addresses for the Past Seven Years: (include street, city, state, zip code)		Dates of Residence:	
_____		_____	
_____		_____	
_____		_____	
_____	_____	_____	
Date of Birth	Other Names Used (including maiden name)	Years Used	
_____			Social
Security Number	Driver's License #	State	

Email address (may be used for official correspondence)			

I have the right to make a request to **IntelliCorp Records, Inc**, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including sources of information, and the recipients of any reports on me which **IntelliCorp Records, Inc** has previously furnished within the two year period preceding my request.

I certify that all elements of the personal data I have provided are true, accurate and complete. I understand and agree that any omission, false statement, misleading statement, or answer made by me on my application or any supplements to it and in any interviews will be sufficient grounds for rejection of employment and my discharge after employment.

_____	_____	_____
Printed Name	Applicant Signature	Date

INFORMATION FOR INTELICORP CUSTOMERS ON ADDITIONAL STATE LAW REQUIREMENTS

DISCLAIMER: THE DISCLOSURE AND AUTHORIZATION FORM, AND THE DISCUSSION OF STATE REQUIREMENTS BELOW, ARE NOT MEANT TO PROVIDE LEGAL ADVICE OF ANY KIND. LEGAL ADVICE SHOULD BE SOUGHT FROM YOUR ATTORNEY IN CONNECTION WITH THE USE OF THESE FORMS OR THE DETERMINATION OF STATE LAW REQUIREMENTS THAT MAY BE APPLICABLE TO YOU. INTELICORP RECORDS, INC. MAKES NO CLAIMS, PROMISES OR GUARANTEES ABOUT THE ACCURACY, COMPLETENESS, OR ADEQUACY OF THE INFORMATION CONTAINED HEREIN.

IN ADDITION TO THE FOREGOING DISCLOSURE AND AUTHORIZATION FORM NEEDED TO COMPLY WITH THE FEDERAL FAIR CREDIT REPORTING ACT, VARIOUS STATES IMPOSE ADDITIONAL DISCLOSURE OR OTHER OBLIGATIONS ON EMPLOYERS WHEN THEY OBTAIN CONSUMER REPORTS OR INVESTIGATIVE CONSUMER REPORTS ON EMPLOYEES OR APPLICANTS.

THE FOLLOWING IS A SUMMARY OF POSSIBLE STATE REQUIREMENTS.

- 1. WITH REGARD TO INDIVIDUALS WHO ARE OR WILL BE EMPLOYED IN CALIFORNIA, MINNESOTA, AND OKLAHOMA, you should add the following language to the end of the Authorization:**
 - You may request a free copy of any consumer report or investigative consumer report we obtain on you by checking the box.

WITH REGARD TO INDIVIDUALS WHO ARE OR WILL BE EMPLOYED IN CALIFORNIA:

Under California Civil Code §§ 1786.16(a)(2) and 1786.22, the following additional disclosure should be provided before procuring a consumer report:

We will be obtaining a consumer report from [name, address, and telephone number of the consumer reporting agency]. You have the right to request from that agency, upon proper identification, the nature and substance of all information in its files on you, including the sources of information, and the recipients of any reports on you, which the agency has previously furnished within the three-year period preceding your request. You may view the file maintained on you by the agency during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services. Upon making a written request, you may receive a summary of your report via telephone.

3. WITH REGARD TO INDIVIDUALS WHO ARE OR WILL BE EMPLOYED IN NEW YORK:

Under Article 25 Section 380-g of the New York General Business Law, if an employer receives a consumer report containing criminal conviction information, the employer must provide the applicant or employee who is the subject of the report, a printed or electronic copy of Article 23-A of the New York Correction Law, which governs the employment of persons previously convicted of one or more criminal offenses.

4. WITH REGARD TO INDIVIDUALS WHO ARE OR WILL BE EMPLOYED IN WASHINGTON STATE:

Under the Washington Fair Credit Reporting Act, you have the right to ask IntelliCorp for a written summary of your rights. If you submit a request to Employer in writing, you have the right to get from Employer a complete and accurate disclosure of the nature and scope of the investigative consumer report Employer ordered, if any. If Employer obtains information bearing on your credit worthiness, credit standing or credit capacity, it will be used to evaluate whether you would present an unacceptable risk of theft or other dishonest behavior in the job for which you are being considered.

5. WITH REGARD TO INDIVIDUALS WHO ARE OR WILL BE EMPLOYED IN OREGON:

Information describing your rights under federal and Oregon law regarding consumer identity theft protection, the storage and disposal of your credit information, and remedies available should you suspect or find that Employer has not maintained secured records is available to you upon request

ADDITIONAL NOTES:

- A. If you intend to obtain a “credit report” to be used for employment purposes, you should be aware that a number of states have enacted laws to limit the use of such reports, and other states are considering such legislation. A ‘credit report’ is a type of consumer report that contains information on a consumer’s credit worthiness, credit standing, or credit capacity. A good source of information about state law restrictions on the use of credit reports for employment purposes is:**

<http://www.ncsl.org/research/financial-services-and-commerce/use-of-credit-information-in-employment-2014-legislation.aspx>

- B. A number of states, through statutes or administrative regulations, also impose limitations on employers asking applicants about arrests and/or convictions. You should review your state’s laws and regulations in this regard.**