



UNION BAY FIRE RESCUE

VOLUNTEER FIREFIGHTER APPLICATION FORM

Section A: Name and Contact Information

Surname:

First Name:

Residential Address:

Town/City:

Province: BC

Postal Code:

Home Phone Number:

Cell:

Email Address:

Please tell us how you heard about Union Bay Fire Rescue?

Section B: Basic Requirements

Driver's License Class:

Restrictions:

Air Endorsement:

(Note: A satisfactory drivers abstract will be required prior to starting your training with Union Bay Fire Rescue)

Do you have a reliable means of transportation?

Do you currently live in the Union Bay Fire Rescue protection area?

Are you 19 years of age or older?

Do you have any medical conditions or disabilities that would inhibit your ability to perform the duties of a firefighter?

(Note: A medical clearance form must be completed by your physician stating that you do not have any conditions that would restrict your ability to perform the duties of a firefighter. You will not be able to take part in any Fire Department operations until this form has been completed by your physician)

Do you have any criminal or summary convictions that would prevent you from being bonded?

(Note: A criminal record search conducted by the RCMP is required of all individuals before final acceptance in joining Union Bay Fire Rescue

Do you have any known phobias? (height, enclosed spaces, etc.)

If yes, please explain:

Section C: Education and Related Training Experience

Education:(Highest Level or Grade Completed) **High School** **Post Secondary**

If yes to Post Secondary, please describe:

Have you ever been a member of any fire department, rescue squad or similar organizations?

If yes, please specify organization(s):

Do you have a valid First Aid Certification?

Level:

Expiry Date:

Do you have a CPR certification?

Expiry Date:

MM/DD/YYYY

Section D: Employment Information

Are you currently employed?

Do you have more than one employer?

Would your employer allow you to respond to emergency calls during working hours?

How many hours do you work on a weekly basis?

Are you a shift worker?

Regular Days Off:

Section E: Commitment and Availability

Are you willing to participate in a mandatory medical check required of potential volunteer firefighters?

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?

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?

(mustache and short sideburns are acceptable as long as they don't affect the seal)

Training night is every Tuesday night for two (2) hours, Probationary Firefighters are required to attend 75% of all regular training nights during probation, 50% attendance is expected after probation is over. Will you be able to meet this requirement?

Do you understand that in order to be available for emergency callouts, you must be able to arrive at the fire station promptly? (volunteers will not respond to an emergency incident if they are under the influence of alcohol or drugs)

Are you willing and able to retain and wear an emergency pager and respond to emergencies 24 hours per day, seven days per week?

Are you willing and able to participate in the occasional weekend training program out of town?

Section F: References

Name:

Phone:

Address:

Name:

Phone:

Address:

Section G: Applicant's Declaration

I, the undersigned apply to become a volunteer firefighter with Union Bay Fire Rescue, and if accepted, will abide by the rules, polices and guidelines as established by the Union Bay Fire Rescue and the Comox Valley Regional District.

- **I consent to a Criminal records search, to be performed by the RCMP, if I am selected for a final interview, and agree to complete and sign any additional consent or other form required by the RCMP for this purpose.**
- **I agree to provide written confirmation from a physician that I am physically able to perform the duties of a firefighter if I am accepted for training.**
- **I will sign a waiver form prior to any departmental physical entrance testing which absolves the CVRD and the Union Bay Fire Rescue of any responsibility for illness or injury because of such entrance testing.**
- **I agree to the use of my likeness in promotional activities within the Fire Services however my consent will be secured prior to my likeness being utilized in each instance.**
- **I agree to attend an information session with my partner to gain more information about Union Bay Fire Rescue**

I certify that all statements in this application are true and correct. I agree and understand that any misstatement of material facts in this application may cause loss of all rights to membership with Union Bay Fire Rescue.

Date:

Signature:

MM/DD/YYYY

Please type in your name above

NOTE: All applications are held on file for a period of three (3) months. Should any information change affecting your application, please stop by and update your file. Not all applications will be accepted. We appreciate your interest in the Union Bay Fire Rescue Department