#### **APPLICATION FOR EMPLOYMENT**



PORTLAND FIRE DEPARTMENT 595 Buddy Ganem Portland, Texas 78374 (361) 643-0155 www.portlandtx.com

#### INSTRUCTIONS TO APPLICANTS

Thank you for your interest in employment with the City of Portland. This application form is an important step in a process that will allow the Fire Department to select a qualified individual for employment. It is very important that you complete the form accurately and completely. Print legibly or type your application.

The City of Portland is an equal opportunity employer. The City complies with Title VII of the Civil Rights Act of 1964, as amended, and does not discriminate on the basis of race, religion, color, sex, or national origin. The City complies with all provisions of the Americans with Disabilities Act. If, because of a disability, you require assistance in completing this application or require special assistance during the application process, you may contact the fire department at (361) 643-0155.

The selection process is designed to be fair to all applicants. Applicants for some positions may undergo written testing and/or oral interviews depending on the position.

Applicants who are selected to proceed after the physical agility testing will be notified by telephone as to the date and time of the oral interviews. After completing the agility testing, applicants should <u>not</u> attempt to call the department for test results. Applicants who are not selected for oral interviews will be notified by mail.

The City may reject an applicant or terminate an employee for falsifying an employment application at any time after the falsification is discovered. Omission of pertinent information with the intent to conceal a fact is considered a falsification.

The City reserves the right to abandon the application process at any time and to re-advertise for new or additional applicants.

If an advertisement for a position includes an return deadline for applications, no application will be accepted after the deadline. Applicants returning an application packet by mail should mail early to insure arrival by the deadline. The City assumes no liability for delays in delivery by the U. S. Postal Service or other parcel delivery service.



## **Application Requirements**

## The following are requirements to apply for this job:

- Must meet the job description requirements for the position applied for.
- Must be certified as a basic structural fire fighter by the Texas Commission on Fire Protection.
- Must be certified as an Emergency Medical Technician by the Texas Department of State Health Services.
- Must possess a high school diploma or G.E.D.
- Must possess a valid Texas driver's license with Class B fire fighter's exemption endorsement.
- Must be in good physical condition, weight in proportion to height.
- When a written test is required, must score a minimum of 70% on the written examination.
- Must pass a Physical Assessment Test.
- Must successfully pass an investigation of personal history and background to determine suitability for the position of fire fighter with the Portland Fire Department.
- Must pass a drug screening examination.
- Must pass an oral interview board.
- Must reside in or within one mile of the city limits of Portland upon hire.
- Must have five (5) years experience at Engineer/Driver's rank or above.
- Must have Associate's Degree in Fire or Business related field. (Years of experience may be considered in lieu of Associate's Degree.)

## Preferred:

- Fire Officer I
- Fire Officer II
- HazMat Tech
- Driver Operator
- Fire Instructor I



#### Portland Fire Department Job Description

#### JOB TITLE: Captain

Purpose of Position:

May perform any of the essential duties described in the specifications of a fire fighter or Engineer in the Fire Department, City of Portland. Recommends assignments to fire fighting personnel at the station; has responsibility for buildings and equipment, operation and maintenance; requests necessary repairs, equipment, supplies and materials for the fire stations; recommends approval of leaves and other personnel actions concerning personnel at the station; plans and lays out on-the-job training activities for personnel in coordination with the overall fire training program; participates as an instructor in fire training as directed; performs fire suppression tactical supervision as directed; performs other activities as required.

#### ESSENTIAL FUNCTIONS:

- 1. <u>Supervises Staff</u>: Gives orders and supervises staff. Ensures tasks are performed according to standard procedures and in an orderly and safe manner. Must be able to communicate orally.
- 2. <u>Prepares Written Reports</u>: Prepares numerous reports such as incident reports, inventory reports, accident reports, monthly activity reports, station log, efficiency reports and ensures the accuracy and that they are prepared within established time frames. Must be able to communicate in writing with superiors and fellow officers. Required to sit and write for one or two hours at a time.
- 3. <u>Fire Station Building Maintenance</u>: Ensures that the building working areas are cleaned and maintained on a daily basis. Equipment and apparatus is checked and serviced to ensure that it is running and/or operating properly. Work performed shall be logged in the station log when completed.
- 4. <u>Sizing Up Fires</u>: Observes fire and smoke conditions and locates source of fire. Identifies appropriate extinguishing techniques and ventilation procedures. Consults pre-plan reports. Applies knowledge of heat and fluid mechanics to anticipate fire behavior. Identifies and

screens or saturates potential exposures using appropriate fire streams or water curtains. Identifies and removes or protects flammable or hazardous materials.

- 5. <u>Handling Hose Lines</u>: When necessary, assists in lays and advances hose lines and connects hose couplings, nozzles and master stream appliances in order to supply water for fire fighting, using Siamese kits, standpipe kits, ropes, hose hooks and hose rollers.
- 6. <u>Schedule Daily Activities:</u> Prepare daily activity schedule to ensure all necessary work is completed in a timely manner. Schedules in-house training to ensure proficiencies are up to standards.
- 7. <u>Monitor Radio Transmissions:</u> Constantly monitors radio transmissions in order to respond to fire/rescue dispatch calls. Assures engine company response immediately to such calls. Continues to communicate with dispatcher to give or receive updated information on the situation on hand. Must be able to have good hearing.
- 8. <u>Instruction:</u> When necessary, may function as an instructor in fire or other types of training. Must utilize communication skills to present training material by various methods such as oral presentation, video, overhead projector, flip chart, etc. May be required to stand from one to two hours at a time.
- 9. <u>Ventilation:</u> When necessary, opens or breaks windows, chops or cuts ventilation openings in roofs, breaches walls or doors and uses fans as directed in structures, in order to remove heat, smoke and gas from burning buildings, using ground ladders, roof ladders, axes, pike poles, roof cutters, saws, battering rams, sledge hammers, fans, fog streams and other equipment, while wearing full turnout gear.
- 10. <u>Salvage/Overhaul</u>: Moves and covers furniture, appliances, merchandise and other property, covers holes in buildings and redirects or cleans up water, in order to minimize damage, using plastic and canvas covers, refrigerator straps, ropes, mops, squeegees and other tools. Pulls down walls and ceilings, cuts or pulls up floors and moves or turns over debris, in order to check for embers or flames and prevent rekindling or further spread of the fire, using pike poles, axes, saws, hooks, or other equipment (possibly) while wearing full turnout gear.
- 11. <u>Rescue/Extrication/Search</u>: When necessary, assists in searching fire area in order to locate victims, while wearing full turnout gear and following standard search procedures. Assists, carries or drags victims from emergency area by means of interior access (stairs, hallways,

etc.), or if necessary, by ladders, fire escapes, platforms or other means of escape. Extricates victims from vehicles, cave-ins, collapsed buildings or other entrapments in order to save lives or remove bodies, using shovels, torches, drills, pry bars, saws, jacks, extrication tools and other equipment.

12. <u>Fire Fighting</u>: When necessary, operates and advances charged hose lines, master stream appliances and fire extinguishers from defensive positions or while advancing toward the fire area in order to extinguish the fire, all the time wearing full turnout gear. Pries open doors or windows, forcing entry, breaking windows or otherwise enters buildings and vehicles in order to search for and rescue victims and provide access to the fire for offensive fire fighting, using axes, pry bars, pike poles, hux bars, battering rams, sledge hammers, bolt cutters and all other tools while wearing full turnout gear.

#### ADDITIONAL PHYSICAL FACTORS:

- 1. <u>Hear Within a Normal Range</u>: A Fire Captain is required to have good hearing in order to be able to listen to instructions from the radio, conversations with background noise, sounds of traffic, breaking glass, warning shouts, suspicious noises, ringing telephones, screams or other sounds of potential danger.
- 2. <u>Have Good Vision</u>: A Fire Captain is required to have good visual acuity, night vision, depth perception and peripheral vision, with the ability to distinguish colors. The Captain is constantly watching individuals, buildings, traffic or crowds of people. The Captain must have good depth perception in order to drive emergency vehicles at high speeds. The Captain must have at least normal peripheral vision in order to detect potential dangers. The Captain is expected to work either day or night and must be able to effectively see at night or during periods of reduced visibility caused by smoke and fire.
- 3. <u>Detect Odors</u>: A Fire Captain is required to have unimpaired olfactory faculties. The Captain must be able to smell the smoke from fires, various types of gas leaks or other distinctive odors.
- 4. <u>Stand</u>: A Captain is required to stand for long periods of time while operating equipment, training and conducting fire suppression activities.
- 5. <u>Walk</u>: A Fire Captain is required to walk on sidewalks and streets, through houses, buildings, vacant lots and fields. A Captain is required to walk on rough, rocky, sandy, muddy, hilly, wet, slippery, sloped or other surfaces often while stepping over or around obstacles.

- 6. <u>Feel or Touch</u>: A Fire Captain is required to feel walls/doors or other objects to detect heat from unseen fires.
- 7. <u>Climb</u>: A Fire Captain is required to climb up and down stairs, over chain link or wooden fences up to eight feet high, through windows, on top of cars or trucks, onto roofs of buildings, houses or ladders.
- 8. <u>Jump</u>: A Fire Captain is required to jump horizontally and vertically. A Captain jumps horizontally to hurdle ditches or mud holes and vertically to vault furniture, fences, short obstacles or jump down from fences, vehicles or other elevated areas the Captain may have climbed on.
- 9. <u>Bend/Crouch/Kneel</u>: A Fire Captain is required to get in and out of fire apparatus unassisted, kneel, bend or crouch to look under low objects such as furniture and cars. The Captain must kneel, bend or crouch to assist ill or injured people.
- 10. <u>Crawl</u>: A Fire Captain is required to crawl through small openings, under, over or around obstacles in order to fight fires and or rescue injured individuals.
- 11. <u>Lift and Carry</u>: A Fire Captain is required to lift and carry conscious and unconscious people weighing up to 200 pounds onto stretchers or to places of safety. A Captain is required to lift and carry fire fighting/rescue equipment weighing up to 150 pounds for distances up to 100 feet.

#### ENVIROMENTAL FACTORS:

Eight hour shifts or twenty-four hours shift with 48 hours off; field conditions; exposure to extreme weather conditions, individuals with contagious diseases and hazards associated with emergency driving. The Fire Captain is exposed to a number of hazards including: chemical, toxic wastes, fumes, mechanical, explosive and extreme temperature swings.

Because of the element of danger present in fighting fires or emergency rescue there is a high stress level which must be coped with.

# VEHICLES, MACHINERY, EQUIPMENT, TOOLS, AND TECHNOLOGY USED TO DO THIS JOB:

- 1. Drive emergency vehicles under emergency conditions.
- 2. Power plants
- 3. Saws
- 4. Extrication tools
- 5. Ladders
- 6. Ventilation equipment
- 7. Breathing apparatus
- 8. Light and electrical cords
- 9. Axes
- 10. Lawn mowing equipment
- 11. Weed eaters
- 12. Edgers
- 13. Fire hoses
- 14.Radios
- 15.Computers

#### KNOWLEDGE, SKILLS, ABILITIES:

- 1. <u>Read English</u>: A Fire Captain is required to read instructions, reports, directions and written orders, bulletins and a myriad of other written and printed materials.
- 2. <u>Write English</u>: A Fire Captain is required to write reports, letters and memoranda.
- 3. <u>Effectively Communicate Orally in English</u>: A Fire Captain is required to be able to speak clearly and concisely and have sufficient command of the English language to be able to communicate with people from all walks of life. A Captain must be able to give directions and instructions to people. The Captain is required to orally communicate with dispatchers and other fire fighters on the radio system to acknowledge calls and pass on information.
- 4. <u>Demonstrate Integrity</u>: A Fire Captain must have high moral character. A Captain is required to be completely trustworthy. On and off duty, a Captain must behave in such a manner that creates community respect. A Captain must refrain from using the position or authority for personal gain and cannot succumb to temptations to take surreptitious advantage of the position. The Captain's personal and professional behavior must be exemplary so as not to detract from their credibility or veracity. The Captain must be free from a history of chronic or habitual

drug abuse, involvement in the illegal sale of drugs or crimes of moral turpitude, all of which would tend to cast doubt on the Captain's integrity and honesty.

- 5. <u>Demonstrate Self Control</u>: A Fire Captain is required to control all emotions in order to act quickly and calmly in emergency situations. The Captain must not over react to verbal abuse but control anger, fear or the desire to retaliate in order to take sound actions which will restore order. The Captain must maintain a high level of composure when involved in stressful or provocative situations. Under highly stressful and emotional situations, the Captain must remain calm and decisively make lucid decisions and take reasonable actions.
- 6. <u>Demonstrate Situational Reasoning Ability</u>: A Fire Captain is required to demonstrate "Common Sense". The Captain must analyze situations, assess potential consequences of alternatives, and then make a logical decision without undue delay. When confronted with a dangerous situation, the Captain must be able to perform those functions quickly and decisively.
- 7. <u>Demonstrate Interpersonal Skills</u>: A Fire Captain is required to anticipate how people will act in given situations and take action to encourage positive behavior. The Captain must be able to consider individual differences within a similar framework of facts. The Captain must be able to interact with a wide variety of people without arousing antagonism and be able to persuade others to behave in an alternative manner without giving offense. The Captain must be assertive when necessary without being overly abrasive but cooperative enough to work as a member of a team.
- 8. <u>Demonstrate Fire Fighting Techniques</u>: A Fire Captain is required to have a thorough working knowledge of modern fire fighting methods and apparatus; thorough knowledge of department rules and regulations; general knowledge of state laws and ordinances pertaining to the operations of the Fire Department; thorough knowledge of the geography of the City and mutual aid areas and particular fire hazards in those areas and the ability to instruct fire fighters in proper fire fighting methods.

Prepared by Portland Fire Department July 2014

Approved:

Randy L. Wright

City Manager

Timothy Vanlandingham

Fire Chief



Applicant's Name:

## Important! Read these Instructions Carefully

These instructions are provided as a guide to assist you in properly completing your Application and Personal History Statement. IT IS ESSENTIAL THAT THE INFORMATION BE CORRECT AND COMPLETE!

Your Application and Personal History Statement will be used as the basis for a background investigation that will determine your eligibility for the position for which you are applying.

- 1. Your Application and Personal History Statement should be typewritten if possible. (This is a fillable form)
- 2. Answer all questions completely. If a question does not apply to you, enter "N/A" in the space provided.
- <sup>3.</sup> Avoid errors by reading the directions carefully before making any entries on the form. Be sure your information is correct and in sequence, before you begin.
- 4. You are responsible for obtaining correct addresses (including zip codes). If you are not sure of an address, check it by personal verification. Your local library may have directory service or copies of the required directories. Include the area code on all telephone numbers.
- 5. If there is insufficient space on the Application and Personal History Statement form, attach extra sheets. Be sure your name is on the page and reference the relevant section and question the information refers to.
- 6. Print a copy of the completed Application and Personal History Statement and have it notarized before turning it in at the Portland Fire Department at 595 Buddy Ganem, Portland, Texas 78374.

Your failure to complete this document accurately and thoroughly may result in the rejection of your application. Any misstatement or misrepresentations, including omitted information, given in the Application and Personal History Statement or interview(s) may result in the rejection of your application and/or immediate termination, without right of appeal, unless subject to an appeal pursuant to the City's Personnel Rules.

If you have any questions regarding the required information, contact the Administrative Assistant's office prior to returning the document. You may reach that office from 8a.m. to 5p.m., Monday through Friday by contacting Ana Mooney at (361) 643-0155.

Attach copies (not originals) of the following documents to your completed Application and Personal History Statement.

- 1. Driver's License (For Identification Purposes Only) and Social Security Card
- 2. Copy of High School Diploma or Equivalency Certification and/or College Diploma
- 3. Licenses and/or proof of certification
- 4. DD214
- 5. Training documentation

Information provided in this section is used for identification purposes only and will not be used against you in the employment process.

Name:					
	Last	First		Middle	
Other Names Use	ed: Maiden, Adoption	, Etc			
Home Address:					
_	Street Name	City	State	Zip	
Home Phone No.	:				
Social Security N	0.:	Are you legal to	work in the U.S.? [	Yes 🗌 No	
Driver's License:					
	Number	State of Issu	e	Expiration Date	
Telephone Number where you can be reached between 8 a.m. and 5 p.m. M/F:					
Email Address:					

## EDUCATIONAL HISTORY

High School Attended:

School Name	Location (City and State)	Dates Attended	Diploma

### Colleges attended:

Name of College	Dates Attended	Credit Hours	Degree Type

ever been expelled for disciplinary reasons from any school you have attended?	No
Dates:	
l ever been placed on academic probation?	
Dates:	
Dates:	
ctivities: (Clubs, Sports, Etc.).	
	Dates:   ever been placed on academic probation?   Yes   No   Dates: Dates:    ctivities: (Clubs, Sports, Etc.).

### EMPLOYMENT HISTORY

Beginning with your present or most recent job, list all of the jobs you have had since the age of 17. Include all part-time, temporary or seasonal positions. Attach additional pages, if necessary.

A JOB IS ANY POSITION YOU ACCEPTED REGARDLESS OF HOW LONG YOU ACTUALLY WORKED.

Check appropriate job description(s)	Full-Time Part-Time	Temporary Seasonal
Employer:		
Employer's Address:		
Employer's Phone No.:		
Employment began on	Ended on	=Total Time
Name of Co-Worker Position held with company / duties ar Title	nd responsibilities:	
Duties / Responsibilities:		
Time in position(s):		
Did you receive job performance evalu	ations while at this company	? 🗌 Yes 📃 No
Name of final supervisor:	Are you eligib	le for rehire? 📃 Yes 📃 No
Reason for leaving this position:		
INVESTIGATOR'S NOTES:		

Check appropriate job description(s)	Full-Time Part-Time	Temporary Seasonal
Employer:		
Employer's Address:		
Employer's Phone No.:		
Employment began on	Ended on	=Total Time
Name of Co-Worker Position held with company / duties a Title	and responsibilities:	
Duties / Responsibilities:		
Time in position(s):		
Did you receive job performance eval	luations while at this company	? 📃 Yes 📃 No
Name of final supervisor:	Are you eligib	le for rehire? 📃 Yes 📃 No
Reason for leaving this position:		
INVESTIGATOR'S NOTES:		

Check appropriate job description(s)	Full-Time Part-T	ime Temporary Seasona	al
Employer:			
Employer's Address:			
Employer's Phone No.:			
Employment began on	Ended on	=Total Time	
Name of Co-Worker Position held with company / duties and Title	d responsibilities:		
Duties / Responsibilities:			
Time in position(s):			
Did you receive job performance evalua			
Name of final supervisor:	Are you e	ligible for rehire? 🗌 Yes 📃 N	NO
Reason for leaving this position:			
INVESTIGATOR'S NOTES:			

Check appropriate job description(s)	ull-Time Part-Time Temporary Seasonal
Employer:	
Employer's Address:	
Employer's Phone No.:	
Employment began on Date	Ended on =Total Time
Name of Co-Worker Position held with company / duties and resp Title	oonsibilities:
Duties / Responsibilities:	
Time in position(s):	
Did you receive job performance evaluations	while at this company? 🦲 Yes 📃 No
Name of final supervisor:	Are you eligible for rehire? 🗌 Yes 📃 No
Reason for leaving this position:	
INVESTIGATOR'S NOTES:	

## PERIODS OF UNEMPLOYMENT

Record any periods of unemployment, since graduating from high school. (A period of unemployment is any time you did not have a job.)

From (Mo. / Yr.)	To (Mo. / Yr.)	Length of Unemployment
<u> </u>		

If you were a full-time college student and held only seasonal employment during school breaks, just indicate your beginning and ending school dates.

Indicate that you were a full-time student, and do not give a length of time for your unemployment. In the work history section, list the jobs you worked.

#### **MILITARY SERVICE**

Have you registered with selective service?						
Have you ever been a member of any branch of the U.S. Armed Forces? 📃 Yes 🗌 No						
Branch of Service:	Highest Rank Obtained:					
Induction date:	Discharge date:					
Type of Discharge:						

A dishonorable discharge is not an absolute bar to employment and other factors will affect the decision to hire or not to hire a civilian candidate. Officer candidates must have an honorable discharge or serve under honorable conditions to be considered for employment.

Awards: (Type and Date)	
Special Schools / Training:	
Have you ever been reduced in rank? Yes	No When?
Reason:	

While in the military service, were you ever arrested for an offense, which resulted in a trial by captain's mast, or by summary, special or general court-martial? \_Yes\_No

If yes, give date, place, law enforcing authority or type of court or court martial, charge and action taken for each incident.

Charge: Results:		Date:				
Last duty	station and name of c	ommanding o	fficer:			
Are you o	currently a member of a	a U.S. Reserv	e or National o	r State Gu	ard organization?	Yes
Branch o	f service:	Grade and Se	ervice #		Are you: Inactiv	ve Standby
Organiza	tion / Station / Unit and	Location:				

#### **CRIMINAL CONVICTIONS**

Have you ever been convicted of any crime, or received deferred adjudication, community supervision or probation for any offense including, but not limited to, driving while intoxicated or driving while under the influence? (All applicants, unless otherwise prohibited by law, will be subject to a criminal history check. Convictions or other criminal history may be relevant if job related, but does not necessarily bar you from employment.)

If yes to any of the above, explain each incident (list juvenile as well as adult occurrences).

#### DRIVING RECORD

How many moving citations have you received since you began driving?	

How many moving citations have you received in the past three years?

Have you ever driven a motor vehicle, since your 17<sup>th</sup> birthday, without a valid driver's license?

Have you ever driven a motor vehicle, within the past three years, without proper insurance? Yes No

Have you ever had your driver's license suspended? Yes No

Date of Suspension:	Type of Suspension:	Date Lifted:	

List, to the best of your memory, all driving citations you have received.

Date	Location	Brief Description	Disposition (Paid, N.G., Etc.)

List all accidents in which you were involved as a driver:

Date	Location	Brief Description

## **DRIVING RECORD (continued)**

Have you ever had your driver's license placed on probation for receiving an excessive number of traffic violations?
Have you ever had a hearing for probation / suspension, etc? 🗌 Yes 📃 No
Have you ever had your insurance revoked, due to the number of traffic citations you have received? Yes No
Have you ever knowingly driven a motor vehicle, after your driver's license was suspended /or after it had been revoked?
Do you have a valid driver's license in more than one state? If so, list:
Have you ever been denied a driver's license for any reason? 🦳 Yes 📃 No
Have you ever been involved in an accident and then left the accident scene without identifying yourself?
Have you ever been involved in an accident, when you were driving, after you had been drinking any type of alcoholic beverage? Yes No
Have you ever been arrested for driving while intoxicated in this or any other state? Yes No
Have you ever struck an unattended vehicle, and then left without leaving identification?

## PERSONAL DECLARATIONS (SINCE 17-YEARS OF AGE)

Drug use covers all descriptive terms used to describe the ingestion of any of the listed types into a person's system. Example: experimented, tried, etc.

Have you ever used:

	YES	NO	Approx. First Date Used	Approx. Last Date Used	Have you ever possessed in any way?
PCP					
Angel Dust					
Marijuana					
LSD					
Peyote					
Mescaline					
Heroin					
Cocaine/Crack					
Quaaludes					
Downers					
Tranquilizers					
Amphetamines/					
Methamphetamines					
Speed/Crank					
Biphetamine					
Ecstasy/XTC Ice					
Preludin					
Dilaudid					
Talwin/PBZ					
Inhalants					
(glue/paint)					
Mushrooms					
(Psilocybin)					
Others					
Designer Drugs				-	
Anabolic Steroids					
Rohypnol (date-					
rape drug)					

## PERSONAL DECLARATIONS (Cont.)

Have you ever sold any of the	e items specified o	n the previous page?	Yes No	
Which	When		# Times	
Have you ever bought any of	the items specifie	d on the previous page	? 🗌 Yes 📃 No	
Which	When		# Times	
Have you ever deliberately in When was the last time?			:)? Yes No	
Have you ever been involved What drug?		e manufacturing of an il	legal drug? <mark> </mark> Yes   [	No
How were you involved?				
Have you ever been involve without profit to you?		elivery of any illegal d	rugs to another pers	on with or
Have you ever transported ill	egal drugs across	a state or U.S. border?	Yes 🗌 No	
Have you ever transported a delivering any illegal drugs?		a favor to someone	else, or help in any	manner in
Have you ever participated in	the manufacture	of any illegal drugs?	Yes No	
Have you ever cultivated or g	rown any illegal dr	ug or substance?	es <mark>N</mark> o	
Alcohol Use:				
Do you use alcohol products Have you ever been under the		ank alcohol during work	in violation of comr	any policy
or procedures? Yes			,,	
Have you ever used over-th directions?  Yes  No	ne-counter medica	tion for any purpose	other than those list	ed in the
Have you ever taken prescrip	otion medication no	ot prescribed for you?	Yes No	
If yes, what type?				
From whom (relation)?				

## PERSONAL REFERENCES

List four (4) persons who know you well enough to provide current information about you. **Do not list relatives or past/present employers.** 

Name	Occupation
Home Address	
Home phone #	
Work Phone#	
Years known	Briefly describe your relationship with this person
Name	Occupation
Home Address	
Home phone #	
Work Phone#	
Years known	Briefly describe your relationship with this person
Name	Occupation
Home Address	
Home phone #	
Work Phone#	
Years known	Briefly describe your relationship with this person
Name	Occupation
Home Address	· · · · · · · · · · · · · · · · · · ·
Home phone #	
Work Phone#	
Years known	Briefly describe your relationship with this person

## **MISCELLANEOUS INFORMATION**

List your professional work-related memberships in groups, associations, or clubs:

Official Name of Organization	TYPE: (E.g. Trade, Business	Office(s) Held	Dates of Membersh	ip
organization	or job-related)		FROM	ТО

Community Activities
Awards, Commendations or Items of Special Recognition:

Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties which you may be called upon to do or which require further explanation?

Yes No

If yes, explain

### MISCELLANEOUS INFORMATION (Continued)

If you are fluent in a foreign language, indicate, in each area, your degree of fluency (excellent, good, and fair).

Language	Reading	Speaking	Understanding	Writing

List any other special skills or qualifications you may possess.	
Special Qualifications and Skills	

List any special licenses you hold (such as pilot, radio operator, scuba, etc.) showing licensing authority original date of issue, and date of expiration.

List any specialized machinery or equipment which you can operate.

Is there anything that would prevent you from fully performing the duties of a firefighter, including working weekends, holidays, evenings, or at night?

#### ACCURACY OF INFORMATION:

I have reviewed each page to make sure all parts are correct and complete. I understand that my eligibility will be based on the information contained on this application. I also understand that the City of Portland Fire Department is an at-will employer and that this document is not an offer of employment nor does it constitute an employment contract.

I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers to questions.

I am fully aware that any such misrepresentations, omissions, or falsifications will be grounds for immediate rejection of my application, or if hired, termination of my employment.

Signature of Applicant

Date

The City of Portland Fire Department is an equal opportunity employer; we do not discriminate based on gender, race, color, national origin, religion, or disability. If you need assistance at any time during the employment process, please notify the Administrative Assistant (Ana Mooney) 48 hours in advance by calling (361) 643-0155.

#### **EMPLOYMENT APPLICATION SUPPLEMENT**

TO THE APPLICANT: If you have been convicted (this includes deferred adjudication and/or a probated sentence) for misdemeanor or felony offense(s), please answer the following questions about this conviction. IF YOU HAVE HAD MORE THAN ONE CONVICTION, COMPLETE A SEPARATE FORM FOR EACH CONVICTION.

A conviction is not an absolute bar to employment and other factors will affect the decision to hire or not to hire a candidate.

Name:
When were you convicted? Where were you convicted?
What were you charged with?
What was the outcome?
Probation: Starting Ending
Jail or Prison:
Fine: \$
Other: Explain:
If you were sent to a detention facility:
When did you start your sentence?
What was the name and location of the detention facility?
When were you released?
Paroled
Sentence completed
If presently on parole, when will your parole be finished?

## VERIFICATION OF DOCUMENTATION

Document	Copy Attached (Yes or No)	Verified By Notary
Driver's License (Class) For Identification Purposes only		
Social Security Card		
HS Diploma/GED or HS Transcript		
College Diploma		
Military Discharge Papers		

Applicant: Please submit a copy of each of these documents that relate to you when you return your Application and Personal History Statement. Thank you.

		Signature	
		Printed Name and Address	
STATE OF TEXAS	§		
COUNTY OF	§		
This instrument was a		wledged before me on the day of _ 	, 20by
		Notary Public, State of Texas My Commission expires:	_
[SEAL]		(Printed/Typed Name of Notary	/)



#### City of Portland Fire Department Physical Assessment Test Candidate Information Sheet

#### Phase 1

#### PLACE: Fire Station #2 595 Buddy Ganem, Portland, Texas

FEMALES1.5 mile run14:5515:2616:2717:2418:001 min. push-ups2621151381 min. sit-ups352722178						
1.5 mile run12:1812:5113:5314:5516:071 min. push-ups33272115151 min. sit-ups4036312620300 meter run01:0701:0701:0701:0701:07FEMALES1.5 mile run14:5515:2616:2717:2418:001 min. push-ups2621151381 min. sit-ups352722178	AGE	20-29	30-39	40-49	50-59	60+
1 min. push-ups33272115151 min. sit-ups4036312620300 meter run01:0701:0701:0701:07FEMALES1.5 mile run14:5515:2616:2717:2418:001 min. push-ups2621151381 min. sit-ups352722178		MALES				
1 min. sit-ups       40       36       31       26       20         300 meter run       01:07       01:07       01:07       01:07       01:07         FEMALES         1.5 mile run       14:55       15:26       16:27       17:24       18:00         1 min. push-ups       26       21       15       13       8         1 min. sit-ups       35       27       22       17       8	1.5 mile run	12:18	12:51	13:53	14:55	16:07
300 meter run       01:07       01:07       01:07       01:07         FEMALES         1.5 mile run       14:55       15:26       16:27       17:24       18:00         1 min. push-ups       26       21       15       13       8         1 min. sit-ups       35       27       22       17       8	1 min. push-ups	33	27	21	15	15
FEMALES1.5 mile run14:5515:2616:2717:2418:001 min. push-ups2621151381 min. sit-ups352722178	1 min. sit-ups	40	36	31	26	20
1.5 mile run       14:55       15:26       16:27       17:24       18:00         1 min. push-ups       26       21       15       13       8         1 min. sit-ups       35       27       22       17       8	300 meter run	01:07	01:07	01:07	01:07	01:07
1 min. push-ups       26       21       15       13       8         1 min. sit-ups       35       27       22       17       8		FEMALES				
1 min. sit-ups 35 27 22 17 8	1.5 mile run	14:55	15:26	16:27	17:24	18:00
·	1 min. push-ups	26	21	15	13	8
300 meter run         01:07         01:07         01:07         01:07         01:07	1 min. sit-ups	35	27	22	17	8
	300 meter run	01:07	01:07	01:07	01:07	01:07

#### PLACE: Fire Station 2, 595 Buddy Ganem, Portland, Texas

DRESS: Candidates should wear appropriate workout attire; shorts and t-shirts are acceptable. Tennis shoes or rubber-soled sports shoes (no cleats) are required.

## ANY CANDIDATE DRESSED INAPPROPRIATELY WILL NOT BE ALLOWED TO PARTICIPATE IN THE TESTING.

The Physical Assessment Test will be conducted at Fire Station 2 in an area approved by the Fire Chief. The Physical Assessment Test is designed to simulate the tasks fire fighters are required to perform during emergency situations and immediately after the emergency has been contained. There are 4 phases in the test. Phase 1, Phase 3 and Phase 4 have a time limit and must be completed within the established time limit for each phase. Phase 2, Aerial Ladder Climb, does not have a time limit but is a Pass/Fail test. You will be required to wear a turnout coat, helmet, self-contained breathing apparatus and gloves during Phase 3 and Phase 4. Phase 4 will begin 3 minutes after you have completed Phase 3. Phase 3 and Phase 4 consists of a series of tasks that must be performed in a specified, continuous sequence for each phase. A description of the specific tasks for Phase 3 and Phase 4 are presented on the next page.

#### Phase 2

#### Aerial Ladder Climb

#### Equipment

Candidates will wear the following safety equipment as provided.

- Helmet
- Gloves
- Rescue or Safety Harness

The candidate will climb to the top of a 75 foot ladder with the ladder positioned at a 70-degree incline. The candidate will perform this event while wearing a safety harness attached to a safety rope. The event will be completed when the candidate grabs the top rung, looks down, makes eye contact with the belay person and climbs down after confirmation of eye contact with the belay person. The belay person will signal by waving to the candidate when eye contact is made. This is not a timed task. This task is a pass or fail event. If the candidate fails this event, the test will be stopped and the candidate will not be allowed to participate in the rest of the test.

The candidate will fail if they:

- 1. Do not reach the top and grab the top rung
- 2. Stop more than three times for more than 10 seconds each
- 3. Cause the safety crew to belay due to a fall
- 4. Refuse to complete the climb
- 5. Do not make eye contact with the belay person upon reaching the top.

#### PHASE 3

- 1. You will be issued a standard fire department turnout coat, gloves and helmet. You will then be assisted in donning a standard fire department self-contained breathing apparatus.
- 2. <u>Timing begins here</u>. Pull one end of a 1 3/4 inch uncharged hose line pre-connected with a nozzle a distance of 150 feet from the engine.
- 3. Drag a 1 3/4 inch charged hose line a distance of 100 feet around an obstacle to a designated point.
- 4. Using a dead blow sledge hammer, the candidate must move a 165 lbs. I-beam from one end of the Keiser machine to the other end by striking the end of the I-beam. If the candidate strikes the I-beam with the handle, the candidate will be given a warning. If the candidate strikes the I-beam again with the handle, the candidate will be disqualified.
- 5. Make three threaded hose connections.
- 6. Carry a saw a distance of 50 feet and place onto a platform. <u>Timing ends when the saw is placed on the platform</u>. <u>If the saw is dropped during the carry, the candidate will automatically fail.</u>

#### YOU MUST COMPLETE PHASE 3 WITHIN 4:30 MINUTES

#### 3-MINUTE REST PERIOD

## **City of Portland**

#### PHASE 4

- 1. <u>Timing begins here</u>. Lift and carry a bundle of rolled 2 1/2 inch hose a distance of 200 feet.
- 2. Simulated Ceiling Breach and Pull- with a 40 lbs. weighted pole, the candidate will lift the pole and touch a designated point on the wall five times, then move over to the weight machine and grasp the handle on the weight machine and pull, in a controlled downward motion, lifting 80 lbs. five times to a designated height and then lowering the weight in a controlled manner to its resting point. This will be considered one set. The candidate will perform four sets total.
- 3. Make four continuous trips of 100 feet carrying a roof ladder secured from a simulated engine company.
- 4. Drag a 175-pound rescue mannequin a distance of 75 feet. Timing ends here.

YOU MUST COMPLETE PHASE 4 WITHIN 5:30 MINUTES

#### PORTLAND FIRE DEPARTMENT PHYSICAL AGILITY MEDICAL INFORMATION FORM

NAME:		EXAM DATE:	
ADDRESS:			
PHONE NUMBER:	EXAM TITL	E:	

The physical agility test consists of a series of job related physical skills that are timed. The test is physically challenging and it is important for you to decide if you are in proper condition to participate. The test is not dangerous if you are in good physical condition, BUT you should not attempt it if you are in doubt. The City of Portland assumes no liability for injuries resulting from the test. You will be permitted to compete in the testing process only after answering the following questions, and reading, signing and dating the following Liability Waiver.

1.	Do you have any diseases of heart or lungs?	YES	NO
2.	Have you ever incurred any injuries to your arms or legs?	YES	NO
3.	Have you ever injured your back and/or do you have any spinal defects?	YES	NO
4.	If you have ever had a job connected injury or illness, do you have any permanent partial disability?	YES	NO
5.	Do you know of any physical reason why you should not take this agility test?	YES	NO

If the answer to any of the above questions is YES, please explain the nature of the injury, disease, or condition in the following allowed space. If your answer to question #4 is YES, explain the extent of the permanent disability.

#### LIABILITY WAIVER

I certify that I have completed this Medical Information Form truthfully. I have not concealed any physical injury, disease or medical problem from the fire department evaluators. I further state that I have read the Fire Fighter Physical Agility Test Candidate Information Sheet and understand fully the tasks I will be required to perform during the physical agility phase of the examination process for the position of fire fighter. I hereby release the City of Portland and its agents from any liability for any injury that I may suffer during the Physical Agility Examination.

Signature:

Date



## Applicant Data Record

Applicants and employees are considered before and during employment without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or handicap, or any other legally protected status. The City of Portland complies with EEO regulations.

This Data Record is included in your application package to comply with government record keeping, reporting, and other legal requirements. Periodic reports of this information are made to the government. The completion of the Data Record is optional. If you choose to volunteer to supply the requested information, please note that all Applicant Data Records are kept in a confidential file <u>and are not</u> a part of your Application for Employment or personnel file if you are hired.

# PLEASE NOTE: YOUR COOPERATION IS VOLUNTARY, INCLUSION OR EXCLUSION OF ANY DATA WILL NOT AFFECT ANY EMPLOYMENT DECISION.

## VOLUNTARY SURVEY

Government agencies at times require periodic report on the sex, ethnicity, handicap, veteran and other protected status of employees. This data is for statistical analysis with respect to the success of the Affirmative Action program. SUBMISSION OF THIS INFORMATION IS VOLUNTARY.

(Please Print)						
NAME		DATE				
ADDRESS						
	07475					
CITY	STATE	ZIP				
SOCIAL SECURITY NUMBER						

CURRENT JOB:					
CHECK ONE:	Male	<b>Female</b>	Age:		
CHECK ONE OF THE FOLLOWING: (Ethnic Origin)  White Hispanic American Indian/Alaskan Native Black Other Asian/Pacific Islander					
CHECK IF ANY OF THE FOLLOWING ARE APPLICABLE					
Vietnam Era Veteran Disabled Veteran Handicapped Individual					