

PERSONNEL APPLICATION



“Save Lives, Protect Property; So That Others May Live”

Equal Opportunity Statement

Applicants are not required to give any information prohibited by law. The volunteer/employment policies of the Piney Grove Fire & Rescue Department are non-discriminatory regarding age, color, sex, race, religion, national origin and disabilities for qualified applicants.

The Piney Grove Fire Rescue Department is committed to serving the citizens of the Piney Grove community and surrounding areas with the highest level of property protection and the preservation of life, addressing any hazard that may arise. We will achieve this by providing excellent, knowledgeable, skillful and compassionate service in an atmosphere that encourages proactive innovation, professional development and diversity.

**P.O. Box 338
7525 Vance Road
Kernersville, NC 27285
(336) 993-5721
www.pineygrovefirerescue.org**

Applicant Status Sheet

For Administrative Use Only

Revised 09-19-2016

Name of Applicant	
<input type="checkbox"/> Application Packet Issued	Issued by: Date:
<input type="checkbox"/> Application Packet Returned	Received by: Date:
<input type="checkbox"/> Application Reviewed	
Initial Interview	
Background Investigation	
<input type="checkbox"/> References Contacted	Date: By:
<input type="checkbox"/> Finger Print Appointment Scheduled Date:	Date of Appointment: Time of Appointment:
<input type="checkbox"/> Release of Information Form Signed by Applicant	<input type="checkbox"/> Finger Print Card received from KPD Date Received:
<input type="checkbox"/> Finger Print Card Mailed to NCSBI Date:	<input type="checkbox"/> Background Investigation Results Letter Received Date Reviewed:
Primary Interview Scheduled Date: Time:	Interview Completed: <input type="checkbox"/> Conditional Offer Extended: <input type="checkbox"/> Conditional Offer Accepted by Applicant: <input type="checkbox"/>
PGFRD FF Abilities Test Scheduled Date: Time:	<input type="checkbox"/> Pass <input type="checkbox"/> Fail Evaluator Signature: Applicant Signature:
<input type="checkbox"/> Training MOU Agreement form completed	By: Date:
ADMINISTRATIVE	
<input type="checkbox"/> Added to NCFFA Roster <input type="checkbox"/> Added to NCAREMS Roster <input type="checkbox"/> Added to VFIS Roster <input type="checkbox"/> Added to Forsyth Benevolent Brotherhood <input type="checkbox"/> Beneficiary Forms Completed <input type="checkbox"/> Entered into Firehouse	Date: _____ By: _____
	Date: _____ By: _____
	Date: _____ By: _____
	Date: _____ By: _____
	Date: _____ By: _____
	Date: _____ By: _____

VOLUNTEER POSITIONS

Volunteer Firefighter

All applicants not N.C. Firefighter (IFSAC Firefighter II) certified will be classified as non-interior firefighters. A Non-Interior firefighter perform limited service work in fire suppression, hazardous material mitigation, and rescue, and does related work as required. Work is performed under regular supervision. Individuals must execute orders of their supervisor promptly and efficiently. Applicants N.C. Firefighter certified performs intermediate protective service work in fire suppression, hazardous material mitigation, and rescue; does related work as required. Work is performed under regular supervision. Individuals must execute orders of their supervisor promptly and efficiently. No personnel will perform medical care until N.C. Emergency Medical Technician Certified.

Volunteer Emergency Medical Technician and Rescue Technician

No personnel will perform medical care until N.C. Emergency Medical Technician Certified. Candidates wishing only to participate in EMT and Rescue Technician duties will be perform related job duties and must execute order of their supervisor promptly and efficiently.

Resident Volunteer Firefighter

The department has an established Resident Volunteer Firefighter program. This program is ideally suited for college students who are pursuing a career in the fire service. Our staff will assist each resident with their career goals in the fire service. The Resident Firefighter works and trains with the department during their stay. All training is provided at no charge. During their stay residents also have duty shift responsibilities to perform. In return for their services, we provide them with living accommodations.

Volunteer Junior/Cadet Firefighter

Performs support functions in fire suppression, and rescue; does related work as required. Work is performed under regular supervision. Individual must execute orders of their supervisor promptly and efficiently.

Volunteer Support Positions

Performs support functions for department to include but not limited to traffic control, fire and life safety education, maintenance and rehabilitation functions; does related work as required. Work is performed under regular supervision. Individuals must execute orders of their supervisor promptly and efficiently.

EMPLOYMENT POSITIONS

Full-Time Shift Employee

Full-time shift employees are assigned to a regular shift and serve as an integral component of the department's continuity of operations. Full-time employment candidates are certified and qualified, possessing prior fire and emergency services experience.

Part-Time Employee

Part-time employees are utilized to augment on-duty staffing levels as well as fill-in for full-time personnel upon absences and various types of leave. Various part-time positions may come available as needed to meet evolving operational needs.

**MINIMUM SELECTION STANDARDS AND REQUIREMENTS FOR FIREFIGHTER/
SUPPORT PERSONNEL**

- At least 18 years of age
- High School Graduate or Completion of GED
- United States citizenship
- Possess a valid Driver's License
- Successfully complete and pass the Piney Grove Firefighters Abilities Test, criminal background check, NFPA 1582 compliant medical exam/physical and drug screening
- Safe driving record

MINIMUM SELECTION STANDARDS FOR JUNIOR/CADET FIREFIGHTERS

- 16-18 years of age with parental/guardian approval
- Currently enrolled in a High School with a minimum overall grade average of a "C"
- United States citizenship
- Pass a criminal background check
- Safe driving record, if applicable

**MINIMUM SELECTION STANDARDS AND REQUIREMENTS FOR EMPLOYMENT
APPLICANTS**

- Possession of North Carolina Firefighter II Certification
- Possession of North Carolina Emergency Vehicle Driver
- Possession of valid North Carolina Office of Emergency Medical Services EMT-Basic Certification (minimum)
- Possession of North-Carolina Rescue Technician Certification
- Valid North Carolina Class B Driver's License

VOLUNTEER PROBATIONARY PERIOD / RECRUIT TRAINING**Firefighter/Resident Firefighter**

All firefighter candidates, who are not currently NC Firefighter certified, must attend and complete the NC Firefighter certification courses/Piney Grove Fire and Rescue Department Recruit Academy during the recruit training period (1 calendar year).

Candidates who currently possess a NC Firefighter certification must complete the Accelerated Piney Grove Fire and Rescue Recruit Academy within 6 months of their official start date.

Emergency Medical Technician/Rescue Technician Candidates

All EMT/RT candidates must complete an approved NCEMT/NREMT approved certification course as well as NCOSFM Rescue Technician Certification courses within the recruit training period (16 months). Additionally, all EMT/RT candidates will be required to obtain the Vehicle Machinery Rescue Specialty Certification, at minimum.

Support Candidates

Support candidates will be required to complete applicable and approved training for the area in which they apply for.

**** All successful Candidates/Employees will be required to complete a one year probationary period****

VOLUNTEER TRAINING REQUIREMENTS

No previous training or experience is necessary. All training required of department personnel is provided and paid for by the Piney Grove Fire and Rescue Department. All personnel are required to complete a minimum number of training hours annually. The training hours are based on the individuals' position with the department.

VOLUNTEER DUTY REQUIREMENTS

Firefighter

All Firefighter personnel, except Resident Firefighter, are required to perform 24 hours of duty time each month. Personnel will be expected to begin performing duty time after the completion of recruit training.

Resident Firefighter

All resident firefighters are required to perform twelve-hour night duty shifts. The night shift hours range from 1700-0700

Emergency Medical Technician/Rescue Technician Personnel

All EMT/RT personnel are required to perform 24 hours of duty time each month. Personnel will be expected to begin performing duty time after the completion of applicable recruit training.

*Note: Firefighter-EMT/RT personnel are only required to complete 24 hours of duty time each month.

BENEFITS

- Accident/Sickness Disability Insurance
- Wellness Program/Fitness Facility
- On-duty Workman's Compensation Insurance
- N.C. Firemen's and Rescue Squad Workers Pension Fund
- Forsyth County Fire and Rescue Association Benevolent Brotherhood Fund
- N.C. State Firefighters' Association Membership
- N.C. State Rescue Association Membership
- Piedmont Firemen's Association Membership
- Annual Physical
- N.C. State Tax Deduction for Volunteer Firefighters
- Educational Scholarship opportunities

Note: Some benefits are not made available until completion of the recruit training.

APPLICATION INSTRUCTIONS

Please fill out this form electronically. Print application and submit it to the Headquarters Fire Station. **DO NOT STAPLE APPLICATION.** Failure to provide all information requested may disqualify you from the application process. If you have any questions, please call the Piney Grove Fire and Rescue Department administration at (336) 993-5721. Applicants must obtain and turn in the following documents with this application:

- If applicable, copies of fire service related certifications, military record, High School Diploma or GED.
- Signed Authorization for Background Check, Pre-Employment Drug Testing and Disclosure and Authorization for a Driver's License Records Check (MVR)
- Signed North Carolina State Bureau of Investigation Authority For Release of Information form.

AUTHORIZATION FOR BACKGROUND CHECK

I hereby authorize The Piney Grove Fire and Rescue Department to contact, obtain and verify the accuracy of information contained in this application from all previous employers (if applying for an employment position), educational institutions, references, criminal record, driving record and release any and all persons, companies, or agencies responding to such investigation from any liability for any damage due to releasing information pertaining hereto. I understand that any misrepresentation or material omission made by me on the application will be sufficient cause for cancellation of the application or immediate termination of employment, whenever it may be discovered.

Applicants Name:
(Printed) _____

Signature of Applicant: _____

Date of Signature: _____

NOTICE TO APPLICANTS REGARDING PREEMPLOYMENT DRUG TESTING

Any individual applying for a position with the Piney Grove Fire and Rescue Department may be required to submit to a urinalysis drug test as a mandatory part of the application process. This notice serves as a written statement of the department's intention to conduct such testing as part of the application process. The testing will be conducted by a certified laboratory/testing service selected by the department, in accordance with the procedures required by applicable state and federal regulations.

Tested applicants will be given a copy of any positive test result. All test results shall be considered confidential by the department and shall not be disclosed to the employees/volunteers of the department, or any other person, other than to those persons for whom such disclosure is necessary.

Positive test results or a refusal to sign this consent form and participate in pre-employment drug testing may be grounds for denial of a volunteer or employment position. Arrangements for testing will be made by a representative of the department, in consultation with each applicant.

Cooperation in scheduling the testing is important for processing an application.

By signing below, you consent to be drug tested and acknowledge you have thoroughly read the foregoing notice, and you understand and agree that in order to be considered for a volunteer or employment position with the Piney Grove Fire and Rescue Department you will comply in full with the department's drug testing policy.

Applicants Name: (Printed) _____

Signature of Applicant: _____

Date of Signature: _____

**Piney Grove Fire and Rescue Department
Disclosure and Authorization for a Driver's License Records Check (MVR)**

Name:		
Last	First	Middle
Address:		City/State
County:	Zip:	Social Security #
Driver's License #		State of Issue:
Date of Birth:		Place of Birth:

This authorization is being given in regards to a MVR (Motor Vehicle Request for a driver's license inquiry) check and this information will be used to determine your qualifications to operate a motor vehicle while conducting official business for the Piney Grove Fire and Rescue Department (PGFRD.) All employees and volunteers are required (yearly) to submit this inquiry before operating any vehicle while on official duty for PGFRD. This includes any department owned, leased, rented or any personal vehicle used or operated for fire department purposes.

PLEASE READ AND SIGN THE FOLLOWING:

I authorize the Piney Grove Fire and Rescue Department to conduct or hire services to conduct a MVR regarding my driver's license/history. I authorize any parties contacted to release information to my employer or its agent (e.g., a consumer reporting agency) regarding my previous driving record, licenses, certifications, medical inquiries, history and any other information. I release all persons and entities from liability for damages that may arise from the release of this information. I waive all provisions of law prohibiting the disclosure of information. I understand that the Piney Grove Fire and Rescue Department and its agents cannot guarantee the accuracy of any information reported to it by third parties. I release Piney Grove Fire and Rescue Department and its agents from liability for damages that arise from errors or omissions in this authorized inquiry of my driving history and/or driver's license.

Any applicant who refuses to complete this form, omits material facts, or provides false information, will not be considered to operate a vehicle while with Piney Grove Fire and Rescue Department.

Signature: _____

Date of Signature: _____

AUTHORITY FOR RELEASE OF INFORMATION

I authorize the North Carolina Department of Public Safety through THE STATE BUREAU OF INVESTIGATION, Special Operations Division, to perform a fingerprint search of the State's criminal history record file and, if applicable, a fingerprint search of the FEDERAL BUREAU OF

INVESTIGATION'S files for a national criminal history record check in connection with my application for employment, or my employment with PINEY GROVE FIRE AND RESCUE DEPARTMENT pursuant to FIRE DEPARTMENT-EMS- APPLICANT - STATE AND FED - NCGS 114-19-12.

(Type or print clearly)

Last Name	First	Middle	Maiden
_____	_____	_____	_____

Social Security Number (Optional*)	Date of Birth	Sex	Race
_____	_____	_____	_____

I understand that the North Carolina State Bureau of Investigation, Special Operations Division, and its officials and employees shall not be held legally accountable in any way for providing this information to the above named agency, and I hereby release said agency and persons from any and all liability which may be incurred as a result of furnishing such information. I further understand that the agency cannot provide a HARD COPY of the results of this criminal history record to me.

*Disclosure of social security number is entirely voluntary and not required. If disclosed, the social security number will be utilized to assist with accurate identification/exclusion of possible criminal history records.

Applicant's/Employee's Signature

Date

This form must be maintained on file with the above named agency for one year. DO NOT MAIL THIS FORM OR A COPY OF THIS FORM TO THE STATE BUREAU OF INVESTIGATION.

POSITION APPLYING FOR:

Vol. Firefighter	<input type="checkbox"/>	Vol. Junior/Cadet Firefighter	<input type="checkbox"/>	Vol. Resident Firefighter	<input type="checkbox"/>
Vol. Support	<input type="checkbox"/>	Full-Time Employment	<input type="checkbox"/>	Part-Time Employment	<input type="checkbox"/>

Name:	Last	First	Middle
Address: Number & Street		City	State Zip Code
ALL PREVIOUS ADDRESSES WITHIN THE PAST TEN YEARS			
Home Phone:	Work Phone:	Cell Phone:	Email Address:
			Valid Driver's License: <input type="checkbox"/> Yes <input type="checkbox"/> No
Driver's License #:	Class of License:	State of Issue:	Maiden Name (if applicable):
Date of Birth:	Place of Birth:	Social Security #	Marital Status:
Allergies:	Are you a U.S. Citizen?	If not a legal citizen, are you a legal resident?	
Person to Contact in Case of Emergency:		Contact's Relation to you:	Contact Phone Number(s):
Emergency Contact(s) Address:			

EDUCATION AND TRAINING

High School Graduate? If yes, month and year:	If not High School Graduate, Highest Grade Completed:	Name/Location of High School	GED? If yes, month and year completed:
Enter Below any Colleges, Universities or Technical School Attended			
Name of School	City/State	Dates Attended	Major Degree

FIREFIGHTER/MEDICAL/RESCUE TRAINING

Enter below all Firefighter, EMS, Rescue or other Applicable Training				
CERTIFICATION	DATE RECEIVED	EXPIRATION (If applicable)	STATE OBTAINED FROM	REMARKS

DRIVING RECORD

N.C. Driver's License # (Indicate if you hold an out-of-state license):	License Class:	Restrictions:
Current # of Points (If any):	Has Your License Ever Been Revoked? If yes, Please Explain:	

EMPLOYMENT HISTORY

Employer Name	Position	Dates Employed	Supervisor	Phone Number	May we Contact?
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

MILITARY EXPERIENCE
 (Please include a copy of your DD214)

MILITARY BRANCH	RANK	DATES OF SERVICE	TYPE OF DISCHARGE
Briefly describe your military job(s) and training:			

CRIMINAL HISTORY

Have you ever been convicted, fined, placed on probation, or imprisoned since you eighteenth birthday? If yes, please explain:	NO <input type="checkbox"/> Yes <input type="checkbox"/>

FIRE/EMS/RESCUE DEPARTMENT WORK/VOLUNTEER HISTORY

Have you ever applied to, or held a position with the Piney Grove Fire and Rescue Department? Yes <input type="checkbox"/> No <input type="checkbox"/> If so, please list below.			
Have you ever been employed or volunteered for a fire, EMS, or rescue department before? If so, please list below.			
DEPARTMENT	ADDRESS	SUPERVISOR	DATES OF SERVICE

REFERENCES

(List three references. Do not list relatives or past supervisors)

NAME	ADDRESS	CONTACT NUMBER	EMAIL ADDRESS

SHORT ESSAY

In the space below, please indicate why you wish to volunteer/work for the Piney Grove Fire and Rescue Department.

Empty space for writing the short essay.

APPLICANT ACKNOWLEDGEMENT STATEMENT

I CERTIFY that all of the statements made in this application are true and correct to the best of my knowledge. I give Piney Grove Fire and Rescue Department and its agents the right to investigate all information given and to secure additional information, if necessary. I hereby release from all liability or responsibility all persons, companies or corporations furnishing such information.

I UNDERSTAND that prior to appointment I may be required to pass a drug test and may be required to pass a physical examination provided by Piney Grove Fire and Rescue Department.

I FURTHER understand that completion of this application does not assure me of an interview or a position and does not obligate Piney Grove Fire and Rescue Department to me in any way.

I REALIZE that any misleading or incorrect statement or failure to complete any part of this application not prohibited by law may render this application void and if selected for a volunteer or employment position would be cause for immediate discharge.

SIGNATURE OF APPLICANT	DATE OF APPLICATION

PERSONNEL APPLICATION SUPPLEMENT PAGE

Utilize this page to further document or explain any areas not adequately addressed in the previous sections.

A large, empty rectangular box with a thin black border, occupying the central portion of the page. It is intended for the applicant to provide further documentation or explanations for areas not fully covered in the previous sections of the application.