APPLICATION PACKET TRACKING



PACKET PICKUP DATE:	
NAME OF APPLICANT:	
ADDRESS:	
PHONE:	
BEST TIME TO CALL:	
EMAIL ADDRESS:	
WHAT TYPE OF VOLUNTEER POSITION ARE YOU APPLYING FOR?	
□FIRE/EMS – Any current, pertinent certifications? □FIRE ONLY– Any current, pertinent certifications? □EMS ONLY– Any current, pertinent certifications? □RESIDENT– Any current, pertinent certifications? □FIRE PREVENTION – Any current, pertinent certifications? □FIRE CORPS	
For Office Use Only: Packet returned date	
□Background form attached	

Dear Applicant,

Thank you for your interest in becoming a volunteer for the Cloverdale Rural Fire Protection District (hereafter CFD).

Cloverdale Rural Fire Protection District covers approximately 50 square miles of rural and residential property in the wildland interface east of Sisters. We lie between two major highways, HWY 20 and 126. The district has approximately 4000 full-time residents. Cloverdale Fire serves as a first responder for fire and medical emergencies with ambulance transport provided by Sisters-Camp Sherman Fire. Cloverdale Fire relies heavily on trained volunteer responders to execute emergency services with the area's increasing call volume. Staffing includes 1 paid Fire Chief, 3 full-time paid shift Captains, and approximately 25 volunteers. Over half the calls in the district are medical emergencies.

As a **Fire/EMS volunteer**, you have rewarding opportunities to explore the world of fire and EMS and the training to do it safely. Whether attacking the fire, operating apparatus or serving the command functions, there is plenty for everyone to do on the fire ground.

As a **Resident volunteer**, we offer individuals 18 years and up, the opportunity to apply for their Fire/EMS Resident Volunteer Program. The program is designed to promote knowledge of the basic operating principles of fire and emergency medical services through day-to-day operations, hands-on experience, and actual classroom time. Resident Volunteers will be trained on the principles of firefighting, fire prevention, fire control, rescue, and emergency services. Education tuition reimbursement of up to \$1500 per term along with a cost-of-living reimbursement of up to \$600 per month. Shift work requirement of 48 hours on with 96 hours off. Housing in the fire station with a requirement of being in the station 51% of the nights.

As a **Fire Corps Volunteer**, you are a critical part of the team. If you love helping people but no longer think running into burning buildings or working car wrecks is your thing, the Fire Corps program may be right for you.

Fire Corps volunteers may receive training and be assigned to provide one or more of the following critical services:

- Teaching fire safety, life safety education such as CPR and first aid training, blood pressure assessments
- Green emergency address sign installation
- Community Risk Education (smoke alarms and fire prevention/safety)
- Conducting home safety checks
- Installing alarms (smoke and carbon monoxide) and fire extinguishers in area homes
- Distributing preparedness materials to residents in your community
- Providing hydration and refreshments to first responders during long incidents
- Wildfire/fuel mitigation
- Office work, data entry
- Other duties and programs as assigned by the Fire Chief

To prepare our personnel to handle these situations, CFD provides the highest level of training and educational opportunities as well as the latest in apparatus and equipment. You will find service with the fire district to be highly rewarding and a satisfying way to serve your family, friends, and community.

To get started in the exciting world of a volunteer with CFD, you must do the following:

- 1. Fill out and return the attached application form.
 - a. Be at least 18 years of age.
- 2. Meet with an interview board.
- 3. Satisfactorily complete the following:
 - a. Background checks, DMV record check, and Drug Tests 4. Any other requirements as stipulated by the Fire Chief.
- 5. Complete a one-year probationary period.

If you have questions regarding the volunteer program, please contact Travis Bootes, Captain at 541-389-2345.

Once again, thank you for your interest in becoming a volunteer with CFD.



CLOVERDALE FIRE DISTRICT APPLICATION FOR VOLUNTEER

CFD makes decisions regarding employment and volunteer applications without regard to race, color, sex, national origin, religion, marital status, age, prior industrial injury, mental or physical handicaps, or any other protected classification unrelated to job performance.

This application will be considered only for the specific job applied for. It will not be retained. Use one application for each position. If you desire to be considered for a position at a future time, you must file a new application.

Please complete this form carefully using a typewriter or ballpoint pen. If you need additional space to answer questions, you may attach extra sheets.

First N	Name	Middle Name	Last Name
DDRESS:			
	Mailing A	Address and Physical Address	
City		State	Zip Code
ELEPHONE: _			
EMAIL:	Residence	Business	Cell Phone
		O SSN:/	
	•	alifications, or skills that you th es of any certifications and/or	· ·

Do you have a current and va	alid driver's license? □YES □NO	
•	State of Issue:	
	f your license and current auto insure	
any crime involving the use of your 18 th birthday? (Do not in convictions.) ☐YES ☐NO If yes, please give a short explan	d of (1) a felony, (2) any crime involver possession of a controlled substant neclude minor traffic violations or arrestation outlining the circumstances of your disposition. Convictions are not necessity	ce, on or after ests without ur conviction. Please indicate the date,
	a disposition. Convictions are not necess	
	EMPLOYMENT HISTORY	
the past 10 years if you have tasks and supervisory, techni to the job for which you are	worked that long. Describe each jol cal, or other responsibilities. Give sp applying. You must complete this se	your present or most recent job. Cover be separately, emphasizing your specific pecial attention to experience relating ction of the application form. Attaching e. If you need additional space, attach
CURRENT EMPLOYER:	ADDRESS:	FROM/_ Mo./Year
JOB TITLE:	SUPERVISOR PHONE #:	TO/_ Mo./Year
DUTIES (Be Specific):		TOTAL TIME Yrs Mos
		☐Full Time ☐Part Time
		□Paid □Unpaid
May we contact this employ for leaving:	er? □Yes □No Reason	

EMPLOYER:	ADDRESS:	FROM/_ Mo./Year
JOB TITLE:	SUPERVISOR PHONE #:	TO/_ Mo./Year
DUTIES (Be Specific):		TOTAL TIME Yrs Mos
		☐Full Time ☐Part Time
		□Paid □Unpaid
May we contact this employer: Reason for leaving:	□Yes □No	
understood and agreed that any materials may result in cancellation been employed. I understand that its essential duties, will be continguated undergo such examination, at CFD In consideration of any service with	horize investigation of all statement is representation by me in this application and/or terminate any offer for a volunteer position went upon passing a physical examinates expense, if requested. The CFD, I agree to conform to the rule oplication and that the information I	cation or any accompanying ion from volunteer status if I have which includes firefighting as one of the district. I
INCOMPL	ETE APPLICATIONS WILL NOT BE CO	NSIDERED

Date: _____

Signature:

IMPORTANT

Please read carefully and initial each paragraph before signing.

	Initials
I understand that this application does not, by itself, create a contract of employment. My position is for a definite period of time, and may unless otherwise prohibited, be terminated understand that no person is authorized to change any of the terms mentioned in this applications.	ed at any time.
criminal acts the authorities may be notified and I may be criminally prosecuted.	Initials
I understand that if my volunteer status is terminated by CFD for dishonesty, breach of tru	Initials st, or any
If SCS RFPD makes an offer of volunteer status to me contingent upon passing a pre-employence physical examination, including a drug screening exam and x-rays, I consent to such exami consent to the release to CFD of any and all medical information, as may be deemed necestudging my capability to do the work for which I am applying.	nation, and I ssary by CFD in
	Initials
I authorize any person, school, current employer (except as previously noted, past employ organizations named in this application form (and accompanying resume, if any) to provide relevant information and opinion that may be useful to CFD in deciding on this application such persons and organizations from any legal liability in making such statements.	e CFD with
	Initials
I authorize the investigation of all within the application (and the accompanying resume, if authorize CFD to contact my present employer (unless otherwise noted in this application employers, and listed references.	-
	Initials
By my signature and initials placed below, I promise that the information provided in this a (and accompanying resume, if any) is true and complete, and I understand that any false in significant omissions may disqualify me from further consideration for employment or volumed may be justification for my dismissal from CFD if discovered at a later date. I agree to notify CFD if I should be convicted of a felony, or any crime involving dishonesty or a breach	onformation or unteer status, immediately

CONFIDENTIAL PERSONAL HISTORY QUESTIONNAIRE

Answer all questions completely. If more space is necessary, use an attached sheet of paper. Making false or untruthful statements is grounds for denial of your application. Be sure to sign and date this form in the space provided.

1.	Have you ever been convicted of (1) a felony, (2) any crime involving theft, or (3) any crime involving the use or possession of a controlled substance, on or after your 18 th birthday? (Do not include minor traffic violations or arrests without convictions.) YES NO If yes, please explain for each incident: 1) Date; 2) Charge; 3) Name of Police Agency; 4) Disposition/Penalty; 5) Name and address of Court; and 6) a detailed narrative account of the incident. Begin with the most recent case and list all incidents.
2.	If you were ever suspended, terminated or asked to resign from any job describe the details in full below.
3.	Have you ever used illegal or restricted dangerous drugs without a doctor's prescription? If yes, provide complete details.
4.	Have you ever had a driver's license from another state? If yes, give for each license: 1) State; 2) License Number; 3) Dates held; and 4) your address at the time.
5.	In the past 7 years, have you ever received a traffic citation (other than for parking) as an adult or juvenile? If yes, include all citations whether convicted or not.

6.	Has your driver's license been suspended, revoked, canceled, or restricted? If yes, explain and include: 1) Date; 2) Reason; and 3) Agency directing.
7.	In the past 7 years have you ever been a driver involved in any traffic accident major or minor, whether your fault or not? If yes, explain.
8.	List two personal non-family references and their occupations; including address, telephone, how long known, and relationship. 1.
	2.
9.	Have you ever been a member of another fire department? If yes, give the name(s) and address of the department(s).
10.	Do you have any physical limitations, which would restrict your ability to perform firefighter or EMS duties? ☐YES ☐NO If so, please explain.

ADDITIONAL SHEET
This space is provided to continue detailed answers to questions. Be sure to identify the item number to which the answer or comment applies.
Item Number - Comments:
PENALTY
Any falsification, withholding, or failure to answer all questions completely and accurately may cause forfeiture of all rights to employment or removal from the list of applicants who have been certified for consideration of employment.
CERTIFICATION
I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers to questions and that all statements and answers are true and correct to the best of my knowledge and belief.
Signature of Applicant (sign in ink) Date signed