



REVELSTOKE FIRE RESCUE SERVICES VOLUNTEER FIREFIGHTER APPLICATION

**ACCURATE AND LEGIBLE COMPLETION OF THIS
APPLICATION FORM IS THE FIRST STEP IN THE REVELSTOKE
FIRE RESCUE SERVICES SCREENING PROCESS**

**INCOMPLETE OR INACCURATE APPLICATIONS WILL NOT BE
ACCEPTED**

SUPPLY ALL INFORMATION REQUESTED

Required with application:

Criminal Record Check - Request from RCMP Station. We can provide a letter indicating it is for a Volunteer Firefighter position and they will waive the fee.

Driver's Abstract - Request from Service BC at the court house or by calling them at 250-837-6981.

**Note - the Medical Clearance Check Form and Deed of Release form contained within are not required until after interviews and selection.



Revelstoke Fire Rescue Services Volunteer Firefighter Application Form

Personal Information

Surname: _____ Given Name(s): _____
Address : _____

City: _____
Province: _____ Postal Code: _____
Telephone (r): _____ Telephone (w): _____
Telephone (cell): _____
BC Medical Services Plan No: _____ Social Insurance No: _____
Email: _____ Citizenship: _____
Height _____ Weight _____

General Information

How many years have you lived at the address indicated above?

Do you: Own Rent

Please list any physical activities that you regularly participate in to keep yourself in good physical condition:

Have you been involved in other community work? Yes No

If yes, please specify:

General Information (cont.)

List your interests and hobbies:

Do you have any disabilities or medical restrictions which may affect your ability to perform the duties of a Volunteer Firefighter? Yes No

If yes, please specify:

Do you have any phobias (heights, confined spaces, etc.) that may prohibit you from performing the duties of a Volunteer Firefighter? Yes No

If yes, please specify:

Do you speak or write a second language? Yes No

If yes, please specify:

Do you have any previous firefighting experience? Yes No

If yes, where and when:

In case of Emergency, who should we contact? (please provide two contacts)

Contact 1

Name: _____ Relationship: _____
Address: _____
City: _____ Province: _____ Postal Code: _____
Telephone (r): _____ Telephone (w): _____

Contact 2

Name: _____ Relationship: _____
Address: _____
City: _____ Province: _____ Postal Code: _____
Telephone (r): _____ Telephone (w): _____

Beneficiary Information

Name: _____ Relationship: _____
Telephone (r): _____
Address: _____

Education & Training

Secondary/High School

Name: _____ Location: _____
Last Grade Completed: _____ Did you graduate? Yes No

Vocational/Trade/Technical Institution

Name: _____ Location: _____
Area of Study: _____ Did you graduate? Yes No

College/University

Name: _____ Location: _____
Area of Study: _____ Did you graduate? Yes No

Other Certificates, Licenses, Apprenticeships, Programs or Related Courses:

Related Skills

Drivers License No: _____ Province: _____

Class(s): _____ Restrictions: _____

Air Brakes: Yes No

Do you have your own vehicle for transportation? Yes No

List any Truck/Heavy and/or Light Equipment experience:

Other Operating Skills:

**** Please provide a recent copy of your Driver's Abstract and Criminal Record Check with this application****

First Aid Certification? Yes No Level/Classification: _____

Current Employer

Employer: _____

Address: _____

Job Title: _____ Length of Service: _____

Supervisor/Manager Name: _____

Telephone: _____

Duties: _____

Are you legally entitled to work in Canada? Yes No

Do you work shifts? Yes No

What are your hours of work? From: _____ To: _____

Current Employment Status?

- | | |
|--|--|
| <input type="checkbox"/> Full Time (more than 35 hrs/week) | <input type="checkbox"/> Part-Time (more than 25 hrs/week) |
| <input type="checkbox"/> Part Time (less than 25 hrs/week) | <input type="checkbox"/> Self-Employed |
| <input type="checkbox"/> Student | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> Other | |

Current Employer (cont.)

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

Always Usually Rarely Never

Who can we contact to verify this? Name: _____ Telephone: _____

Is your job site in the Revelstoke Fire Rescue Services Protection Area? Yes No

Describe your experience/skills as they may apply to Revelstoke Fire Rescue Services (ie. Carpentry, mechanical, electrical, plumbing or other):

How do you think you would be an asset to Revelstoke Fire Rescue Services?

If accepted by Revelstoke Fire Rescue Services, you are required to attend weekly practices on Wednesday nights (Approximately 7:30 pm to 9:00 pm)

Can you meet this requirement? Yes No

References (please provide three)

Reference 1

Name: _____ Title: _____
Organization: _____ Telephone: _____

Reference 2

Name: _____ Title: _____
Organization: _____ Telephone: _____

Reference 3

Name: _____ Title: _____
Organization: _____ Telephone: _____

FOR REVELSTOKE FIRE RESCUE SERVICES USE ONLY

TESTING AND AUTHORIZATION DOCUMENTATION

ORAL INTERVIEW COMPLETED _____
PHYSICAL TEST COMPLETED _____
ORAL INTERVIEW (CHIEF) COMPLETED _____
CRIMINAL RECORD CHECK _____
DRIVING RECORD CHECK _____

READ CAREFULLY BEFORE SIGNING

I, the undersigned, apply to enroll as a volunteer firefighter with the Revelstoke Fire Rescue Services, and if accepted will undertake to perform such duties as may be assigned to me by the Fire Chief, or his/her delegate(s).

I hereby certify:

1. That the information given on the application documents is true and I understand that any untrue statements will disentitle me for hire and will be cause for dismissal.
2. That I understand:
 - that my signature on this form is my permission to contact my present/past employers to obtain references and releases them from any liability from the *Freedom of Information Act*.
 - that there will be a 6 month probationary period during which my performance and suitability for the position will be reviewed.
 - that as a condition of volunteering I will be required to pass a physical exam before my confirmation.
 - that I consent to a Criminal Record Check * **Must provide prior to acceptance**
 - that I consent to a Driving Record Check * **Must provide prior to acceptance**
 - that I consent to a Medical Clearance Check ***Must provide prior to physical fitness assessment**

**Wait until after you have passed the oral interview to complete medical clearance check with your doctor.

Date: _____ Signature: _____

By signing and submitting this application you are indicating your acceptance of the above conditions.

Application can be mailed to or dropped off at:

Revelstoke Fire Rescue Services
PO Box 170
227 W 4th Street
Revelstoke, BC V0E 2S0

or faxed to:

1-250-837-4154

Thank you for completing this application and for your interest in the Revelstoke Fire Rescue Services.



City of Revelstoke

PO Box 170, Revelstoke, British Columbia V0E 2S0
www.cityofrevelstoke.com info@cityofrevelstoke.com

Fellow Citizen:

As Fire Chief of Revelstoke Fire Rescue Services, I am committed to providing the most effective and most efficient fire protection for our community. You will find that participation as a volunteer member of our service will bring personal rewards and satisfaction, raise self-esteem and give you a tremendous sense of accomplishment for a job well done. It will also provide the City of Revelstoke and Protection Area with a valuable service.

Service as a volunteer member of Revelstoke Fire Rescue Services requires a serious commitment; however, your decision to join us should not be made quickly. Careful consideration should be made of the many factors associated with becoming a member of the fire service. This information package has been developed to provide the information needed to help you understand this commitment and to assist you in making your decision.

Once you understand what is involved in being a volunteer member of Revelstoke Fire Rescue Services, you may find that you are able to make the commitment we need. The service provided by our fire department is truly valuable to the citizens of Revelstoke, and I hope you are able to contribute to our public safety.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Rob Girard', is positioned below the word 'Sincerely,'.

Rob Girard
Fire Chief,
Revelstoke Fire Rescue Services

THE NATURE OF OUR BUSINESS

The Fire and Rescue Service is one of the most diverse and challenging professions known today. It is this diversity that inspires men and women to enter the service, as volunteers, paid-on-call firefighters or career employees. Imagine having to train to prepare yourself to cope with situations that range from structure fires to motor vehicle accidents to hazardous chemical spills to heart attacks, and almost any other possible emergency situation in between. This diversity is coupled with the fact that these skills may be needed at any time of day, seven days a week, in any kind of weather, and very often under potentially stressful and emotional circumstances. These factors contribute to our profession being personally very rewarding.

Our primary goal is to protect the public; this is accomplished in two ways:

- 1) The first is to prevent fire emergencies from occurring. This is done through fire prevention, inspections, fire safety education and code enforcement programs.
- 2) Secondly, we are here to prepare ourselves to control fire emergencies and assist at medical emergencies. This is done through education, training, pre-incident planning, more training, state-of-the-art equipment and more training.

This business is not for everyone, you need more than just a desire to help people. You also need courage and dedication, assertiveness and a willingness to learn new skills and face new challenges. The Fire and Rescue Service is not for the meek or timid or for those who lose control of their emotions during times of crisis. Our service is one which calls on its members to perform hot, sweaty, dirty, strenuous work, often in uncertain and hazardous environments.

The personal rewards and satisfaction received from the Fire and Rescue Service are often beyond description. There is a sense of accomplishment after controlling a building fire, joy and elation when a child is rescued, compassion for accident victims and fulfillment in teaching fire safety. The list goes on and on.

The bottom line in our business is measured by the loss of life, pain and suffering, and property damage we have prevented and reduced. We exist and are prepared for one reason only - to provide service to the community.

If you feel you have what it takes to meet the challenges of our business, we welcome you to join us.

GENERAL DUTIES AND REQUIREMENTS - VOLUNTEER FIREFIGHTER

1. Volunteer firefighters report to the Fire Chief and/or designated officers.

Nature and Scope of Work

2. Firefighters are responsible for the combating, extinguishing, and preventing of fires and saving of life and property within the City of Revelstoke fire protection area. They participate in training as required by the department training program.

Illustrative Examples of Duties

3. Without restricting the general nature and scope of the work, the following are illustrative examples of work which may be expected of a volunteer firefighter
 - a) is prompt at all meetings and practices
 - b) abides by fire department procedures, rules and regulations
 - c) attends promptly when the alarm is paged out
 - d) lays and connects hose, directs water streams, raises and climbs ladders, as well as uses portable extinguishers, self-contained breathing apparatus, and other firefighting, rescue, safety tools and equipment
 - e) searches for and rescues persons from danger.
 - f) ventilates premises to release heat and smoke; places salvage covers to prevent water damage
 - g) drives and operates motor driven firefighting equipment where applicable
 - h) remains at the scene of an emergency or call out unless given permission to leave by the Incident Commander in charge
 - i) returns to the station after calls and practices to assist in cleaning of equipment and making the apparatus and equipment ready for the next alarm; reports the loss or damage of apparatus or equipment
 - j) cleans and maintains personal protective equipment and ensures it is ready for use
 - k) serves on committees as elected or appointed
 - l) makes recommendations to the Fire Chief or their designate for the good of the department
 - m) partakes of training as directed by the Fire Chief or their designate
 - n) performs First Responder duties (if applicable)
 - o) performs related duties as required

Required Training and Experience

4. The following are the required training and experience for this position:
 - a) Successful completion of department recruit training program basic firefighter training.
 - b) First Responder Level 3 with endorsements (if applicable)
 - c) Driver Training Course
 - d) ICS 100

Profile:

Revelstoke Fire Rescue Services is a combined service consisting of 1 career Fire Chief, 1 career Fire Inspector/Assistant Chief, 1 career Dispatcher/Clerk, 1 career Training Officer/Assistant Chief, 4 career Firefighters, and 33 volunteer Firefighters.

Mission Statement:

We commit ourselves to preserving life and property by providing fire prevention, emergency planning, public education and responding to emergencies within our community. We dedicate ourselves to the safety, security and well being of our members.

Organization:

Revelstoke Fire Rescue Services operates under the direction of the Fire Chief who is responsible to the City of Revelstoke.

In order to deliver the services needed to accomplish the above-stated mission statement, the department is organized into four major divisions:

- Operations - responsible for the delivery of emergency services for fire and rescue, as well as First Responder Services.
- Fire Prevention - responsible for inspections, plan reviews, permits, investigation, and public education.
- Administration - responsible for finance, planning, logistics, and to provide support to other divisions.
- Training - responsible for achieving and maintaining the skills and expertise to accomplish the department's stated mission.

Operations:

Revelstoke Fire Rescue Services responds to approximately 500 calls per year, ranging from structure fires to grass fires, from public assists to false alarms and to assist the BC ambulance service by providing First Responder care.

Training and Participation:

Over the years, the Fire Service has evolved into a public safety agency providing highly technical and diverse services. The general public has come to rely on the fire department as the "first responder", not only when life and property are threatened by man-made and natural disasters, but for seemingly smaller problems as well.

In order to ensure that all members of the department are prepared to deliver the best level of services required, training standards have been developed to provide each member with the needed skills, knowledge and abilities necessary to deliver fire and emergency first aid service to the citizens of the fire protection area.

Training Requirements - Recruits and Probationary Firefighters:

All volunteer members entering the department, regardless of prior training or experience, must complete a basic fire fighter training program and other training programs taught by the department. They must work for six months on probation, prior to being accepted as full members of the department.

Firefighters:

All volunteer members of the department participate in the fire service training program. Members are expected to attend a minimum of 60% of the weekly practices each year. Individuals who have the desire to increase their skills are provided with the opportunity for advance training in subjects such as driver operator and auto extrication.

QUESTIONS ASKED MOST OFTEN BY PROSPECTIVE VOLUNTEER MEMBERS:

Q. What is the cost to me of the required training?

A. The required training for volunteer firefighters is provided by Revelstoke Fire Rescue Services free of charge. Transportation to and from accredited additional training is funded by Revelstoke Fire Rescue Services.

Q. How much will I have to pay for my protective clothing?

A. All required protective clothing is provided by Revelstoke Fire Rescue Services, at no cost to the individual.

Q. What is the format of the volunteer member's training schedule?

A. The Recruit Training Program is spread over a 6 month period. Training will require week nights and may include some full day weekends. Entry level CPR and First Responder training (if applicable) is handled in a similar manner.

Q. Who provides insurance coverage for my activities as a volunteer firefighter?

A. Normal Work Safe BC coverage is in effect whenever the individual is working for the department. Revelstoke Fire Rescue Services also has insurance coverage for auto liability when operating department vehicles, as well as accidental death and disability coverage. The department also has a special life insurance policy for all members.

Q. Are volunteer firefighters directly paid in any way?

A. Volunteer firefighters are paid for weekend summer standby at the rate set by the fire budget. Also, the volunteers receive a monthly stipend that is paid out twice a year at the executive's discretion.

Q. After my initial training, how much time will I be expected to give as an active member?

A. While the exact time requirements vary, the average training and call out time is approximately 12 - 18 hours per month.

Q. How often will I be on call to respond to emergencies?

A. Our system depends upon volunteer firefighters being available to answer all emergencies. The department therefore expects that volunteer firefighters, when in their fire protection area, will be on call 24 hours a day, 7 days a week, 365 days a year. This is a major commitment that needs careful consideration before you undertake it. The department realizes that no one can be available all of the time, but it relies on the commitment from volunteer members to respond whenever they are available. Potential members should be aware that this commitment cannot be taken lightly; their response to emergencies is a lifeline to the public that they serve.

Q. How quickly will I have to respond to emergencies?

A. The department would normally expect that all available members would respond immediately to a page out while following all rules set out in the Motor Vehicle Act (obey stop signs and speed limits).

- Q. How long do emergency call outs last?**
A. The average callout last less than an hour. A working structure fire may extend to 3 to 4 hours. Major, multi-alarm fires may last 8 to 10 hours. Very rarely, a major emergency may extend for days.
- Q. It is possible for me to concentrate my participation and specialize in one area of fire department response?**
A. All volunteers are generalists, capable of doing any of the fire or rescue tasks that may occur at an emergency. Specialist training is provided, but not to the exclusion of the requirement to be able to participate in all department activities.
- Q. Will there be physical tests prior to acceptance by the department?**
A. Yes. You will be required to perform a series of physical tests to ensure that you are capable of doing the task required as a firefighter.
- Q. Can a female be a firefighter with the department?**
A. Yes. We currently have female firefighters. There is nothing in our policies or training that prohibits a female from being a volunteer or full-time member of the department.
- Q. Is there a social aspect to belonging to the fire department?**
A. Yes. In addition to the contribution to the community, firefighters often find a personal satisfaction in belonging to the fire department community. Members participate regularly in fire department socials, as well as department related activities such as golf tournaments, hose coupling competition and community projects.
- Q. Am I required to participate in fundraising activities?**
A. Yes. The firefighters in Revelstoke raise monies for two organizations - the British Columbia Professional Firefighter's Burn Fund and the Muscular Dystrophy Association of Canada in events such as voluntary toll booths, boot drives, Christmas tree chipping, etc.

VOLUNTEER FIREFIGHTER MEDICAL EXAMINATION

Surname: _____ **Given Names:** _____

EXAMINING PHYSICIANS PLEASE NOTE

The medical examination to be performed is to determine if the applicant has maintained an acceptable level of fitness to perform as a firefighter and has not contracted any disabling disease or disability to prevent effective functioning as a firefighter.

The physician shall determine, using any testing procedures felt necessary, if the applicant is fit for active firefighting duties so that firefighters will not jeopardize themselves and other personnel that they may come in contact with while performing their duties. To function as a member of the fire department, it is essential that the applicant be physically and mentally fit to perform the many and varied duties of a firefighter.

The fee for the service of the physician for this examination is the responsibility of the applicant.

1. Height _____ Weight _____ B.P. _____ Posture _____

2. Vision: Without Glasses R.20/_____ L.20/_____
With Glasses L.20/_____ R.20/_____

3. Hearing R. _____ L. _____

4. Oral Hygiene: Good Fair Poor

5. History of previous illness: _____

6. Is there any evidence of:

- | | | |
|-------------------------|--------|-------|
| a) Hernia | Yes___ | No___ |
| b) Asthma | Yes___ | No___ |
| c) Fainting Spells | Yes___ | No___ |
| d) Dizziness | Yes___ | No___ |
| e) Allergies | Yes___ | No___ |
| f) Arthritis | Yes___ | No___ |
| g) Back Trouble | Yes___ | No___ |
| h) Infectious Hepatitis | Yes___ | No___ |
| i) Tuberculosis | Yes___ | No___ |
| j) Heart Trouble | Yes___ | No___ |
| k) Epilepsy | Yes___ | No___ |
| l) Hypertension | Yes___ | No___ |
| m) Diabetes | Yes___ | No___ |
| n) Respiratory Trouble | Yes___ | No___ |

If yes, please specify: _____

7. Details of any physical impairment. (Please be specific)

8. Is this your first contact with the patient Yes____ No____
If no, how long have you treated the patient? _____

9. Does the applicant have any nervous problems? Yes____ No____
If yes, please specify. _____

10. Does applicant have any alcohol or drug problems? Yes____ No____

11. Is the applicant taking any regular medication? Yes____ No____
If yes, please specify. _____

11. In light of your examination findings and the guidance of this form, do you consider the applicant physically and mentally capable of performing the duties of a firefighter?
Yes _____ No _____

Date: _____

Signature of Physician: _____

Physician: _____

Mailing Address: _____

City/Postal Code: _____

Telephone Number: _____

Complete and return in person **if selected** for practical evaluation

PHYSICAL FITNESS PRACTICAL EVALUATION READINESS QUESTIONNAIRE

For applicant's use and guidance, please present to examiner at time of testing. This questionnaire is designed as a sensible first step to take if you are planning to subject yourself to the rigorous physical fitness tests for firefighter applicants.

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1. Have you ever been bothered by shortness of breath? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you had frequent bouts of respiratory problems, such as influenza, asthma or pneumonia? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you any back, neck, knee, hip, or ankle problems that would prevent you from lifting heavy objects? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Has your Doctor ever said you have heart trouble? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Do you often feel faint or have dizziness? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Do you frequently have pains in your heart or chest? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Has a Doctor ever said your blood pressure was too high or low? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Has your Doctor ever told you that you have a bone joint problem such as arthritis, that is aggravated by exercise, or might be made worse with exercise? | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are you not in good physical condition and not accustomed to vigorous exercise? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Is there any good reason not mentioned here why you should not undergo strenuous physical testing, even if you wanted to? | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Is there any current or previous medical conditions you feel you should disclose to the examiner? | <input type="checkbox"/> | <input type="checkbox"/> |

<p>If you answered YES to one or more questions:</p> <p>a) Consult with your personal physician. Explain which questions you answered "Yes" to on this questionnaire and show your physician this sheet.</p> <p>b) You will not be allowed to participate in the practical evaluation unless you present a written statement from your physician indicating that you are cleared to participate.</p>	<p>The information will be used for the purpose of an operating program of the Revelstoke Fire Rescue Services. If you have any questions about the collection and use of this information, contact the Fire Chief.</p>
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Signature

Print Full Name

Date

Complete and return in person if selected for practical evaluation.

DEED OF RELEASE for PRACTICAL EVALUATION

I, the undersigned applicant, acknowledge that I have been warned that undergoing physical tests described in the application information can be dangerous to my health, if I am not in good health and physical condition. I hereby certify that I have satisfied myself that undergoing such tests will not be dangerous to my health. I further certify that I accurately completed the Physical Fitness and Practical Examination Readiness Questionnaire.

To the best of my knowledge, I do not at present have an illness or injury of any nature whatsoever.

In consideration of Revelstoke Fire Rescue Services considering my application as a volunteer firefighter, I expressly agree that it is my sole responsibility to determine whether I can undertake such tests without danger to my health.

I release and discharge the Revelstoke Fire Rescue Services and the City of Revelstoke from any and all claims, damages and actions of every nature for or in respect of anything done or omitted to be done in connection with the establishment or supervision of the physical fitness tests, or the advice as to their nature and possible danger to my health, whether or not such act or omission shall constitute negligence, and in particular from any and all injuries, including death, which may result from my performing or attempting to perform such tests.

IN WITNESS WHEREOF, I have set my hand this _____ day of _____,
20_____.

Signed in the presence of:

Revelstoke Fire Rescue Services Staff

(Print full name)

(Signature of applicant)