

Williamson County ESD 5 is a fast-growing Fire Service organization located in Jarrell, Texas. Our second station is opening in September '22 and we will take delivery on a 105' Quint Ladder Truck in November '22. Staffing is expected to grow consistently over the next 10 years with up to 12 new fire fighters in '22-'23. Come Join Our Exciting, Up and Coming Department!

Williamson County ESD 5 is Now Hiring for 3 Lieutenant Officer Positions!!!



SALARY

- \$63,095 Starting Pay
- Yearly Step-Raise
- Monthly Incentive Pay up to \$250
- FLSA Overtime for hours over 106 in 14 day pay period.

REQUIREMENTS

- TCFP Basic FF Certification
- TDSHS EMT-B Certification
- Valid Driver's License
- Acceptable Criminal & Driving Record
- 3 years of documented experience as Fire Officer (Lt. or above)
- 9 years of documented total experience as a Firefighter
- TCFP Driver/Operator-Pumper
- NIMS 100, 200, 700, 800
- Fire Officer I & II within 1 year

PREFERRED QUALIFICATIONS

- 5 years of experience as Fire Officer
- 11 years of experience as Firefighter
- TCFP Advanced FF Certification
- Spec Ops Experience
- Hazmat tech
- Fire Officer I & II

EMPLOYEE BENEFITS

- 48/96 Schedule
- Health, Dental & Vision Insurance
- Paid Vacation- 144 hours/yr
- Paid Sick- 144 hours/yr
- TCDRS Retirement- 7% Contribution with employer match 2:1
- Optional Health Savings Account (HSA)
- Annual Health & Cancer Screening
- Voluntary 457b Retirement Plan

For additional information and to apply, visit our website under Employment.

Application Deadline: 9/21/2022 Assessment Center: 10/6/2022

Apply Online at www.wilcoesd5.org

Phone: (512)746-2505

Email: Admin@wilcoesd5.org



FULL-TIME UNIFORMED OFFICER- LIEUTENANT EMPLOYMENT

Minimum qualifications for applicants:

- TCFP Basic FF Certification
- TDSHS EMT-B Certification
- Valid Driver's License
- Acceptable Criminal & Driving Record
- 3 years of documented experience as Fire Officer (Lt. or above)
- 9 years of documented total experience as a Firefighter
- TCFP Driver/Operator-Pumper
- NIMS 100, 200, 700, 800
- Fire Officer I & II within 1 year

Preferred Qualifications (not required)

- 5 years of experience as Fire Officer
- 11 years of experience as Firefighter
- TCFP Advanced FF Certification
- Spec Ops Experience
- Hazmat tech
- Fire Officer I & II
- Veterans / Prior Fire service experience

Williamson County Emergency Services District #5 does not discriminate based on race, color, national origin, sex, religion, age, disability.

All applications will be reviewed using the "Applicant Check Sheet".
Minimum factors that will be checked for are:

- Completed Application
- Release of Employment Record
- Minimum Qualifications Verification
- TCFP Certifications (verified online)
- TDSHS Certification (verified online)



Any of the following may also disqualify an applicant from further consideration in the current selection process:

Criminal History

- Having a conviction for; under indictment for; or, currently charged with any felony offense, (Application will automatically be rejected).
 - Previous convictions will be evaluated on a case-by-case basis, but in general the conviction will need to be in excess of 5 years.
- Having a conviction for; under indictment for; or, currently charged with any Class A or Class B misdemeanor offense on or after a date that is within 3-years of the application closing date for the current selection process.
- Having a conviction for "Driving While Intoxicated/Driving Under the Influence", (DWI/DUI), on or after a date that is within 3-years of the application closing date for the current selection process.
- Applicant must successfully pass a:
 - **All applicants must pass a Texas Criminal History check:** A name-based search of the Texas Department of Public Safety (DPS) database of crimes committed in Texas and obtain a fingerprint card.
 - This will be the responsibility of the applicant to pay for.
 - **For out of state applicants an FBI fingerprint-based search** of both the DPS database of crimes committed in Texas and the Federal Bureau of Investigation (FBI) database of crimes committed within the United States.
 - This will be the responsibility of the applicant to pay for.

Driving Record

- Having a record that shows excessive traffic convictions or negligent traffic collisions on or after a date that is within 3-years of the application closing date for the current selection process.
- Having a record that indicates more than two moving violations on or after a date that is within 3-years of the application closing date for the current selection process.
- Having driver's license suspended for reasons of indicating poor driving on or after a date that is within 3-years of the application closing date for the current selection process.

Military

- Having been discharged from the military service with a dishonorable discharge or a general discharge characterized as bad conduct.



Drug Use

- Illegal use of a controlled substance on or after a date that is within 3-years of the application closing date for the current selection process.
- Having any record of illegal and excessive use and possession of controlled substance; or having furnished illegal controlled substance to another individual(s).

Negative work history

- Work history that shows that the candidate was irresponsible or unreliable in previous work positions.



Williamson County Emergency Services District #5
P.O. Box 88, Jarrell, TX
76537 Phone (512) 746-
2505

Employment Application
Uniformed Personnel

NAME: _____
 Last First MI

SSN: _____

HOME ADDRESS: _____
 Street or Box City State Zip Code

MAILING ADDRESS: _____
 Street or Box City State Zip Code

PHONE:

Home #: _____ Cell #: _____ Pager #: _____

Work #: _____ E-Mail Address: _____

Check the type of employment you are seeking:

Full-Time Firefighter

PRN Firefighter [As Needed] (Shift Availability _____)

State the salary you expect: \$ _____ per _____

Do you have relatives by blood or marriage employed or otherwise associated with Jarrell FD/Williamson County ESD # 5?

Yes No

If "Yes", list the name and relationship: _____



List any special skills or qualifications which you have: _____

List any special tools or equipment which you can use: _____



PERSONAL HISTORY STATEMENT

NAME: _____
Last First Middle

CURRENT RESIDENCE: _____
Street or Road City State Zip Code

List any other names, including nicknames by which you may be known:

Are you at least 18 years old? Yes No

Birthplace: _____

Are you eligible for employment in the United States? Yes No

Military Service? Yes No

If YES, state period of service: _____

Driver's License: _____

Number State Class Restrictions

List all moving violations within the past three (3) years:

List all places where you have lived in the past three (3) years:
From to Address (Street or Box, City, State, Zip)

Have you ever been convicted of a felony and/or or a class A or B
misdemeanor offense? Yes No

If YES, explain in detail on a separate page and attach to application.



Has your driver's license ever been suspended or revoked? Yes No
If YES, explain:

Briefly explain any traffic accidents which you have been involved in, within the last ten (10) years:

Do you routinely take medication? Yes No

If YES, explain: _____

Describe how often and how much alcoholic beverage you consume: _____

Have you used drugs other than those prescribed by your physician? Yes No

If YES, explain: _____



**EDUCATION AND TRAINING
RECORD**
(Attach additional sheets if necessary)

LAST NAME: _____

**HIGH
SCHOOL:**

Name and location of last high school attended:

Graduated: Yes No Year: _____

If "NO" last grade completed: 8 9 10 11

GED:

If you have not graduated from high school, have you taken and passed the GED test?

Yes No Date: _____ Place: _____

BUSINESS/TRADE/TECHNICAL SCHOOLS:

NAME AND LOCATION OF SHOOOL	FROM	TO	COURSES COMPLETED

COLLEGES OR UNIVERSITIES:

NAME OF SCHOOL ATTENDED	LOCATION	FROM	TO	HOURS COMPLETED	DEGREES RECEIVED	DATE OF DEGREE	MAJOR SUBJECT



LAST NAME: _____

GRADUATE OR PROFESSIONAL SCHOOLS:

NAME OF SCHOOL ATTENDED	LOCATION	FROM	TO	HOURS COMPLETED	DEGREES RECEIVED	DATE OF DEGREE	MAJOR SUBJECT

Copy of diploma, transcripts, or certifications attached? Yes No

List any licenses or certificates, (including issue, authority, and expiration date), which qualify you for the position you are seeking:



LAST NAME: _____

EMPLOYMENT RECORD
(Attach additional sheets if necessary)

PRINT OR TYPE IN BLACK INK

Give a record of each position held. Answer all questions clearly and completely. Give name used on the payroll if different than that used on this application. Give all the requested information, including the actual number of hours worked per week if part-time. Give a full description of duties performed so that proper evaluation can be made. Begin with the current or last position held and work back to your first position.

Your job title: _____			From: ____/____/____			To: ____/____/____		
Name of business or organization: _____						Phone: _____		
Address of business: _____			_____			_____		
Street			City			State		
Name and title of your supervisor: _____								
Number and kind of employees supervised by you: _____								
Final Salary \$ _____			per _____			<input type="checkbox"/> Check if Full-Time		
Give average number of hours worked per week if part-time: _____								
Describe the duties of your position in order of importance:								

Reason for Leaving: _____								
May we contact your current employer?			<input type="checkbox"/> Yes			<input type="checkbox"/> No		



LAST NAME: _____

EMPLOYMENT RECORD CONTINUATION

Your job title: _____		From: _____ / _____ / _____	To: _____ / _____ / _____
Name of business or organization: _____		Phone: _____	
Address of business: _____		_____	
Street	City	State	
Name and title of your supervisor: _____			
Number and kind of employees supervised by you: _____			
Final Salary \$ _____ per _____		<input type="checkbox"/> Check if Full-Time	
Give average number of hours worked per week if part-time: _____			
Describe the duties of your position in order of importance: _____			

Reason for Leaving: _____			
May we contact your former employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			



LAST NAME: _____

EMPLOYMENT RECORD CONTINUATION

Your job title: _____		From: _____ / _____ / _____	To: _____ / _____ / _____
Name of business or organization: _____		Phone: _____	
Address of business: _____		_____	
Street	City	State	
Name and title of your supervisor: _____			
Number and kind of employees supervised by you: _____			
Final Salary \$ _____ per _____		<input type="checkbox"/> Check if Full-Time	
Give average number of hours worked per week if part-time: _____			
Describe the duties of your position in order of importance: _____			

Reason for Leaving: _____			
May we contact your former employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			



LAST NAME: _____

EMPLOYMENT RECORD CONTINUATION

Your job title: _____			From: ____/____/____			To: ____/____/____		
Name of business or organization: _____						Phone: _____		
Address of business: _____			City _____			State _____		
Name and title of your supervisor: _____								
Number and kind of employees supervised by you: _____								
Final Salary \$ _____			per _____			<input type="checkbox"/> Check if Full-Time		
Give average number of hours worked per week if part-time: _____								
Describe the duties of your position in order of importance: _____								

Reason for Leaving: _____								
May we contact your former employer? <input type="checkbox"/> Yes <input type="checkbox"/> No								

MAKE ADDITIONAL COPIES OF THIS PAGE AS NEEDED



LAST NAME: _____

REFERENCES

List four persons, ***include their relationship to you***, who know you well enough to provide current information about you. Do not list relatives or your current supervisor. You must include complete addresses (including residence and mailing address), and phone numbers.

NAME	COMPLETE ADDRESS	TELEPHONE NUMBERS
<hr/> <hr/>	<hr/> <hr/>	HOME: _____ WORK: _____ CELL: _____ YEARS KNOWN: _____
<hr/> <hr/>	<hr/> <hr/>	HOME: _____ WORK: _____ CELL: _____ YEARS KNOWN: _____
<hr/> <hr/>	<hr/> <hr/>	HOME: _____ WORK: _____ CELL: _____ YEARS KNOWN: _____
<hr/> <hr/>	<hr/> <hr/>	HOME: _____ WORK: _____ CELL: _____ YEARS KNOWN: _____



AFFADAVIT

LAST NAME: _____

I hereby certify that this application and any attachments contain no willful or negligent misrepresentation or falsification and that the information given by me is true and complete. I understand that should investigation disclose any such misrepresentation or falsification; my application will be rejected and that I will be declared ineligible for employment.

Signature (DO NOT PRINT) Date

I understand and agree that:

ANY MATERIAL MISREPRESENTATION OR DELIBERATE OMISSION OF A FACT IN MY APPLICATION WILL BE JUSTIFICATION FOR THE REFUSAL OF EMPLOYMENT, OR, IF EMPLOYED, TERMINATION OF EMPLOYMENT.

The material I have provided is accurate to the best of my knowledge.

The person and employer(s) named in this application are authorized by me to verify the information I have provided and to provide Jarrell FD/WCESD 5 with any information that may be required to make an employment decision.

Signature (DO NOT PRINT) Date