



FULL-TIME UNIFORMED FIREFIGHTER/EMT EMPLOYMENT

Minimum qualifications for applicants:

- Texas Commission on Fire Protection *Structure Firefighter –Basic*
 - ♦ *Must be certified by date of job offer*
- Texas Department of State Health Services - *Emergency Medical Technician – Basic*
 - ♦ *Must be certified by date of job offer*
- Acceptable criminal record through Texas Department of Public Safety
- Acceptable complete driving record from all states the applicant has been issued a driver's license in within the past 5 years (Class C or higher)
- DD214 (Military Discharge Record), if applicable
- NIMS 100, 200

Preferred Qualifications (not required)

- NIMS 100, 200, 700, 800
 - State of Texas Class B driver's license
 - National Fallen Firefighter Foundation
Courage to Be Safe
 - National Highway Incident Traffic
Incident Management
 - Ability to speak Spanish
Veterans / Prior Fire service experience
- a. For applicants that can provide a DD-214, showing a discharge under honorable conditions, applicants will have five bonus points applied to their written test
 - b. For applicants that can provide written proof of 5 years prior fire service experience, applicants will have five bonus points applied to their written test. If the applicant is hired with Williamson County ESD 5 the chief may elect to hire the applicant as a two-year firefighter and start at a higher pay rate.

EQUAL OPPORTUNITY EMPLOYER

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)



Once the application process is completed and an application is accepted, a **four-part** applicant selection process will be scheduled. The candidate selection process includes a written test, a physical agility test, a panel interview, and Chief interview.

The **written test** is developed from the IFSTA 6th Edition Essentials textbook (Publisher: Brady) and basic knowledge.

Only those passing the written test with a score of 70% or above will be invited to take the physical agility test. The **physical agility test** will be conducted **IMMEDIATELY** following the written test. Those invited to take the written text must bring shoes and clothing that are appropriate for physical exercise. Adequate time will be given to applicants to change into the appropriate clothes and prepare for the physical agility test.

Before taking the physical agility test the candidate must sign a release of liability form to participate.

The physical agility test consists of:

Charged hose drag
Equipment carries
Keiser sled or tire strike
Dummy drag
Fixed ladder raise (x2)

The applicant must complete the tasks within a 4- minute time frame to pass the physical agility test. Applicants will receive a walkthrough of the physical agility test and be given a chance to ask any questions prior to attempting the test. The physical agility test is graded as PASS or FAIL.

Applicants who pass both the written and physical agility test will proceed to the interview portions of the applicant's selection process at a future date. This notification will be sent via email.

The **interview panel** will be scored by using an "Interview Score Sheet" on a scale of 1 to 5, with 1 being the lowest and 5 being the highest. Those obtaining an average interview score of 20 or greater will advance in the hiring process.

Should the applicant **successfully proceed** through the written test, physical agility test, and interview panel, the applicant will be required to provide copies of criminal history (less than 90 days old), driving record (less than 90 days old), firefighter certification(s), EMT certification(s), proof of education documents.



- **This process is successive. The process consists of (1) Written Test (2) Physical Agility Test (3) Panel Interview (4) Chiefs Interview.**
- **Applicants may obtain a copy of their criminal history and driving record at their local Texas Department of Public Safety office. The cost of these are borne by the applicant. To be considered current, these documents must be dated within 90- days of the date the application is received by Williamson County ESD 5/ Jarrell FD.**

ALL CANDIDATES MUST PASS EACH SUCCESSIVE STEP IN THE PROCESS TO PROCEED.



PROCESS INFORMATION AND INSTRUCTIONS **FOR** **APPLICATION FOR UNIFORMED FIREFIGHTER/EMT EMPLOYMENT**

Please read all information provided herein. Applications that are improperly completed or incomplete may be rejected and the applicant may not be allowed to proceed in the candidate selection process.

All potential applicants must complete a comprehensive application. Completion of the application and acceptance by Williamson County ESD 5/ Jarrell FD is merely the beginning of the process for selection. Applications are only accepted during specified time periods when Williamson County ESD 5/Jarrell FD initiates a new eligibility process.

Each application must be completed exactly as specified in the instructions for the application to be accepted.

Applicants **must** be certified as a minimum of a Basic Structural Firefighter by the Texas Commission on Fire Protection (TCFP) by the date of job offer. An applicant **must** also be **currently** certified at a minimum of an EMT-B, by the Texas Department of State Health Services (TDSHS) by date of job offer.

Following is a list, of absolutes, which must be met before an application will be processed:

- All applications must be complete.
- Applicants must include detailed explanation of entries on criminal history or driving record.
- Applications must be typed or printed in **black ink or blue ink** and be legible.
- All blanks must be filled in or have "N/A" entered for "Not Applicable".
- Applications must be turned in by the Application Closing Date.
- Applications may be returned by e-mail to admin@wilcoesd5.org or mailed to PO Box 88, Jarrell Texas, 76537 or delivered in person to 155 County Road 313, Jarrell Texas, between the hours of 0800 through 1600.

Applicants that are eligible to take the written test and physical ability test **will receive notice for testing dates via email.**

Applications that are rejected will **NOT** be notified.



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.



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: _____



LAST NAME: _____

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

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 _____ 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? Yes 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								

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
_____ _____ _____	_____ _____ _____	HOME: _____ WORK: _____ CELL: _____ YEARS KNOWN: _____
_____ _____ _____	_____ _____ _____	HOME: _____ WORK: _____ CELL: _____ YEARS KNOWN: _____
_____ _____ _____	_____ _____ _____	HOME: _____ WORK: _____ CELL: _____ YEARS KNOWN: _____
_____ _____ _____	_____ _____ _____	HOME: _____ WORK: _____ CELL: _____ YEARS KNOWN: _____



LAST NAME: _____

AFFADAVIT

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