



MKI Fire's FF/EMT Salary Starts at \$37,440.00 +OT, Paid Leave and Benefits
**see individual fire districts for wage information*

Hiring List Recruitment Closes: November 13, 2019, 4:00 PM

JOB SUMMARY

Performs fire suppression duties as a line level firefighter. May respond to emergencies via ambulance, fire apparatus or as a single responder in conjunction with outlying fire agencies. Will be required to maintain skill and proficiency in all aspects of both fire and emergency medical services.

Highlights of Major Responsibilities:

- Responsibilities will include provision of emergency medical care as well as fire suppression and other emergency response duties.
- Participate in necessary training and skill maintenance activities for both fire and emergency medical services.
- Conduct station and vehicle maintenance tasks as assigned.
- Conduct prevention and public education activities in fire and emergency medical subjects.

Knowledge, Skills and Abilities:

- Considerable knowledge of fire suppression techniques, equipment and procedures.
- Considerable knowledge of Emergency Medical Services and a minimum of Basic Life Support techniques.
- Skill in documentation and report writing.
- Ability to effectively communicate with district staff, supervisors and public.
- Physical ability to meet the physical demands of fire-fighting, rescue and emergency medical work.

Minimum General Requirements:

- Must be at least 18 years of age.
- Must have a valid driver's license.
- Must have a High School Diploma or GED

For those who possess the minimum qualifications and are invited to participate, the written exam will be held at Worley Fire on November 16, 2019. The physical ability test will be held November 17th at the KCFR tower located at 5271 E Seltice Way, Post Falls, ID

Minimal Professional Requirements:

- Completed Firefighter I or equivalent.
- NREMT Certified or equivalent. Must be able to certify in the State of Idaho.

Selection Process

The selection process will consist of five elements:

1. Complete employment application, available at Worley Fire Protection District Station #1 located at 31541 S Highway 95, Worley, ID 83876 or at www.worleyfire.com. Applicant's qualifications, education and employment history will be evaluated from the application. Application due no later than November 13, 2019 at 4:00pm.
2. Selected candidates will then be contacted to complete a written examination. Testing materials are Essentials of Firefighting 6th Edition and The Brady EMT 11th Edition.
3. The candidates with the highest test scores will be asked to participate in a physical ability test.
4. Candidates will be ranked on an eligibility list based upon your written score. Additional points may be awarded to volunteers in good standing and to veterans with an honorable or general discharge.
5. Interviews will be conducted at the time of hiring. Candidates will be asked to participate in an oral interview before a panel that will include fire, emergency medical and public safety professionals.

Application Packet

Application packets are available at: www.worleyfire.com or www.mkifire.com

Completed employment application & **non-refundable** \$50 application fee must be returned to Worley Fire Protection District Station #1, 31541 S Highway 95, Worley, ID 83876

NO LATER THAN 11/13/19 at 4:00 PM.

Equal Opportunity Employer

People of all ethnic backgrounds, persons with disabilities, and veterans are encouraged to apply. In accordance with the American's with Disabilities Act, reasonable accommodation for persons with disabilities will be provided to participate in the application and selection process, if requested. Please notify the District about the accommodation needed, preferably at the time of application, but at least two days prior to the date needed.



Worley Fire Protection District
31541 S. Highway 95
Worley, ID 83876
208-686-1718



Mica Kidd Island Fire Protection District
6891 W Kidd Island Rd
Coeur d Alene, ID 83814
208-686-1718

APPLICATION

Must be at least 18 years of age to apply.

DATE: _____

Name _____
Last First MI

Address _____

City _____ County _____ State _____ Zip _____

How long have you lived at this address? _____

Mailing address if different from above _____

Please list all other residences that you have resided in the last five (5) years and the dates that you lived there:

ADDRESS

DATE

List any other names that you have ever used to identify yourself:

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Social Security Number: _____

Email Address: _____

Driver's License #: _____ **State Issued:** _____

Please provide a copy of your license.

Residence Phone _____ **Business Phone** _____

Cell Phone _____ **Message Phone** _____

Are you a United States citizen? Yes _____ No _____

Can you legally work in the United States? Yes _____ No _____

Did you serve in the military? Yes _____ No _____

When _____ **Branch** _____

Have you ever been convicted of a crime (felony or misdemeanor)? Yes _____ No _____

If yes, please indicate date, charge, location, and disposition:

Do you have a clean driving record for the past 5 years?

Have you completed Firefighter I or Equivalent? _____

If yes, when _____ **Did you pass?** _____

Please list any experience you have had in emergency services (volunteer or paid):

Please list any special qualifications or skills which you possess:

EDUCATION

High School	Location	Dates	Years Completed
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_____	_____	_____	_____
_____	_____	_____	_____

Did you graduate? Yes_____ No_____ GED _____ Date Received_____

College of University	Location	Dates	Years Completed
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_____	_____	_____	_____
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Did you obtain a college degree or vocational certificate? Yes_____ No_____

Date Received_____ Type of degree or certificate_____

Please list any professional or vocational licenses and/or certifications, which you have obtained:_____

Please list any special qualifications or skills which you possess:_____

EMPLOYMENT

Employer Name, Address, & Phone Number_____

Dates Employed: To:_____ From:_____ Job Title_____

Duties Performed:_____

Name and Title of your immediate supervisor:_____

Reason for Leaving:_____

Employer Name, Address, & Phone Number_____

Dates Employed: To:_____ From:_____ Job Title_____

Duties Performed:_____

Name and Title of your immediate supervisor:_____

Reason for Leaving:_____

Employer Name, Address, & Phone Number_____

Dates Employed: To:_____ From:_____ Job Title_____

Duties Performed:_____

Name and Title of your immediate supervisor:_____

Reason for Leaving:_____

Employer Name, Address, & Phone Number_____

Dates Employed: To:_____ From:_____ Job Title_____

Duties Performed:_____

Name and Title of your immediate supervisor:_____

Reason for Leaving:_____

REFERENCES

List four (4) character references, whom you have known for at least two (2) years, and who have personal knowledge of your character and fitness for the position for which you are applying. DO NOT include relatives or persons living outside the Continental U.S.

NAME

ADDRESS

PHONE NO.

I hereby make application for employment with Worley Fire Protection District and Mica Kidd Island Fire Protection District and certify statements made on this application and any other materials submitted with this application are true under penalty of perjury. I understand that falsified information will be cause for denial of application or termination of my employment, as well as possible legal action.

Signature of Applicant: _____ Date: _____

(For office use only)

Date Received _____ Background Check (sat./unsat.)
Received By _____ Status Letter sent: yes no Date sent: _____

PLEASE READ AND INITIAL EACH PARAGRAPH BELOW

(if there is any part of this page you do not understand please ask the employer about it before signing).

I do hereby authorize Mica Kidd Island Fire Protection District (hereinafter MKIFPD) to thoroughly investigate my character references, work records, education, military, criminal background, police records, traffic offenses of record and other matters related to my suitability for employment and, further, authorize my current and former employers to disclose to the fire district (s) any and all letters, reports and other information pertaining to my employment with them, without giving me prior notice of such disclosure. In addition, I hereby release MKIFPD, my current and former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure. ____

I understand that if offered employment, the offer may be contingent on my passing a pre-employment alcohol and drug screen and a pre-employment NFPA medical physical exam. By signing this application, I voluntarily agree to submit a pre-employment alcohol/drug screen and pre-employment NFPA medical physical exam upon request. I understand that failure to pass the alcohol/drug screen and/or NFPA medical physical exam will result in withdrawal of the employment offer. ____

If hired, I also agree to submit to alcohol or drug testing as a condition of employment. I agree that MKIFPD may conduct alcohol or drug screening at its sole discretion with or without notice. I also understand that refusal to submit to an alcohol/drug screen will be considered a voluntary resignation of employment. _____

I understand that nothing contained in the application or conveyed to me during any interview, which may be granted, is intended to create an employment contract, implied or explicit, between MKIFPD and me. In addition, I understand and agree that if I am employed, my employment relationship with MKIFPD is strictly voluntary and at our mutual will. I understand that if employed, my employment is for no definite period and I may terminate it at any time, with or without prior notice, with or without cause or reason. Likewise, MKIFPD has the right to terminate my employment, or otherwise discipline, transfer, or demote me at any time, with or without reason, at the discretion of MKIFPD. In the event that some or all employees become subject to a collective bargaining agreement (CBA) that is duly executed between the employees' representative and MKIFPD, the procedures set forth in the CBA with regard to employee discipline and termination procedures will be followed. _____

I understand and agree that any future changes in my title, duties, compensation, working conditions, and/or MKIFPD benefits, policies and procedures will not alter our at-will and arbitration agreements. _____

I understand that if offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the United States upon beginning work. _____

If the position applied for requires driving in the course of work, I understand that I will be required to possess a current and valid driver's license to legally drive in the State of Idaho and understand that I will be required to provide a copy of my official driving record. I also understand that any offer of employment is contingent on my ability to be covered by MKIFPD auto insurance, if required for my position. _____

I hereby certify that I have not withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct. Unless otherwise stated, I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement on this application or on any documents used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. ____

My signature below certifies that I have read and understand this complete page, and agree to the terms and conditions outlined in this document. ____

Applicants Printed Name

Applicant's Signature

Date