



West Thurston Regional Fire Authority

Thurston County Fire Protection District's No. 1 & 11

10828 Littlerock RD. SW, Olympia WA 98512 ♦ <http://www.westthurstonfire.org>

Ph: (360) 352-1614 ♦ Fax: (360) 352-1696

VOLUNTEER APPLICANTS CHECKLIST

NAME:	DATE:
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<input type="checkbox"/>	Signed Statement of Intent to Volunteer
<input type="checkbox"/>	Completed Membership Application and Signed Disclosure Statement
<input type="checkbox"/>	Completed Criminal History Check Sheet and Driving Record Evaluation
<input type="checkbox"/>	Completed and Signed WSP Request for Criminal History Record
<input type="checkbox"/>	Copy of Driver's License
<input type="checkbox"/>	Copy of Social Security Card

All of the above items must be completed in order for your application to be processed



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MEMBERSHIP APPLICATION

We appreciate your interest in being a volunteer with West Thurston Regional Fire Authority. We want all of our potential volunteers to have a good understanding of our district requirements for volunteers; these requirements are put into place to ensure the safety of our volunteer and career staff as well as those in the community that we serve.

West Thurston Regional Fire Authority is an ever evolving volunteer fire department that is supported by career firefighters. We are offering opportunities in derical service, public education, emergency medical care and fire suppression.



Our policy requires that you have a good driving record and pass a criminal background check. Please review the attached information regarding these and if you feel you meet the standards, please complete the application and the history forms and return them to us. We will send for the Driver's Abstract and Criminal History reports and contact you after reviewing your application and background information.

Once we have reviewed your application and contacted you, you will begin the testing and interview process. Whether you want to be a firefighter or EMT you will be required to complete the entire process. We conduct physical and written testing as well as oral board interviews on a monthly basis, you will be contacted with the next testing date.

-  *The physical ability test consists of timed exercises that relate directly to fire service work and require a better than average fitness level to pass. (Regular exercising is recommended.)*
-  *The written test is to test your abilities in reading and basic math as it relates to fire service.*

Upon completion and passing of the physical and written test as well as completion of the oral interview, you will be called in for the Chief's interview. Following the interview, you will be asked to get a DOT physical exam (we will give you the proper forms upon completion of testing)

Becoming a volunteer firefighter or EMT takes a lot of time and hard work. Once you have completed our testing and application process you will be scheduled to begin training and be issued gear and a uniform (you need to provide your own footwear and belt);

-  *Fire academy is held twice a year and includes over 130 hours of training on weeknights as well as multiple skills weekends. (Failing to attend all classes and skills weekends will result in failing the academy)*
-  *The Medic One EMT course is over 150 hours including evenings and some weekends. (Failing to attend all classes and practicals will result in failing the course)*

Once you have completed the academy or EMS class you will be assigned to shift at one of our stations in Grand Mound, Rochester or Littlerock (based completely on district needs). You will participate in community events and attend regular training. You will be expected to respond to emergency calls and assist in maintaining our apparatus, equipment and stations.

Shifts are every nine days. Weeknight shifts begin at 6:30pm and go until 7:30am. Weekend shifts are 24 hours; they begin at 7:30am on Saturday or Sunday morning and continue until 7:30am on Sunday or Monday morning (respectively). Once you are assigned to a shift, you are required to be there, if you can't make it then you are responsible to find a replacement and notify the officer in charge. Remember, firefighting/EMS is the only **profession** you can volunteer for!

Thank you for your time and interest. We look forward to hearing from you soon.

If you have questions about volunteering with West Thurston Regional Fire Authority; please contact Patricia at 360-507-7064 or via email at: patricia.caturia@westthurstonfire.org



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STATEMENT OF INTENT TO VOLUNTEER SERVICES

It is my intent to give service as a volunteer to West Thurston Regional Fire Authority. I understand that I will not receive compensation for my services, but may receive a nominal fee and/or expense reimbursement, as determined by the Governing Board.

I offer my services freely and without pressure or coercion direct or implied from any member of West Thurston Regional Fire Authority or the Governing Board. In addition, I understand that my service as a volunteer is subject to termination from the program without notice by both myself and the Department. I understand that I am not an employee, and that as a volunteer, I am not subject to employment laws.

I understand that volunteer duty responder shifts worked at any of the West Thurston Regional Fire Authority stations are voluntary and are not required, but if I choose to work these shifts I will receive "per diem" for the meals missed by being on duty per policy.

SIGNATURE:

DATE:



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PERSONAL DATA	POSITION APPLYING FOR				
	NAME			WORK PHONE	HOME PHONE
	ADDRESS			D.O.B	SOCIAL SECURITY NUMBER
	CITY	STATE	ZIP	DRIVERS LICENSE NUMBER	EMAIL ADDRESS
	Do you have any conditions which would prevent you from performing in this position? Yes No				
	If yes, what accommodations would you need, if any, to assist you in performing your duties? (please attach)				

NAME OF SCHOOL, UNIVERSITY OR VOCATIONAL SCHOOL	DEGREE	DATES ATTENDED FROM/TO	MAJOR	GPA
HIGH SCHOOL				
COLLEGE				
COLLEGE				
OTHER				
OTHER				

EMPLOYMENT HISTORY	List your work experience for the last 3 years including self employment, military service and periods of unemployment. Attach additional sheets if necessary			
	MOST RECENT EMPLOYER		PHONE	FROM-TO
	ADDRESS		HOURS WORKED	
	TITLE/POSITION		IMMEDIATE SUPERVISOR	
	JOB DESCRIPTION			
	REASON FOR LEAVING			
	EMPLOYER		PHONE	FROM-TO
	ADDRESS		HOURS WORKED	
	TITLE/POSITION		IMMEDIATE SUPERVISOR	
	JOB DESCRIPTION			
	REASON FOR LEAVING			
	EMPLOYER		PHONE	FROM-TO
	ADDRESS		HOURS WORKED	
	TITLE/POSITION		IMMEDIATE SUPERVISOR	
	JOB DESCRIPTION			
REASON FOR LEAVING				

For internal use only:
 Date received: _____ By: _____ Followed up: _____ By: _____

List any organizations you have volunteered for		
VOLUNTEER ORGANIZATION	PHONE	FROM-TO
ADDRESS	HOURS WORKED	
TITLE/POSITION	IMMEDIATE SUPERVISOR	
JOB DESCRIPTION		
REASON FOR LEAVING		
VOLUNTEER ORGANIZATION	PHONE	FROM-TO
ADDRESS	HOURS WORKED	
TITLE/POSITION	IMMEDIATE SUPERVISOR	
JOB DESCRIPTION		
REASON FOR LEAVING		
VOLUNTEER ORGANIZATION	PHONE	FROM-TO
ADDRESS	HOURS WORKED	
TITLE/POSITION	IMMEDIATE SUPERVISOR	
JOB DESCRIPTION		
REASON FOR LEAVING		

CERTIFICATES	EXPIRATION DATE	SKILLS
TYPING SPEED	HOW MANY YEARS OF COMPUTER EXPERIENCE DO YOU HAVE?	
WHAT COMPUTER SOFTWARE ARE YOU PROFICIENT WITH?		
OTHER RELATED EXPERIENCE		

List names and telephone numbers of three business/work references who are <i>not</i> related to you, and are <i>not</i> previous supervisors. If not applicable, list three school or personal references who are not related to you.				
NAME	TITLE	RELATIONSHIP	PHONE	YEARS KNOWN

PLEASE LIST PRIMARY AND SECONDARY EMERGENCY CONTACTS		
NAME	RELATIONSHIP	PHONE NUMBER
NAME	RELATIONSHIP	PHONE NUMBER

CONVICTION/CRIMINAL HISTORY INFORMATION

This form must be completed to be considered for employment

When considering individuals for employment (both career and volunteer), conviction/criminal history records are reviewed as they are related to the content and nature of the work, and the safety and security of the fire district staff and the public. A conviction/criminal history does not necessarily disqualify an individual for employment/volunteer membership. Criminal history records will be subject to a satisfactory criminal conviction report. Applicants will be asked to sign a separate release form. Applicants who do not sign the release will be removed from the consideration for the employment/volunteer membership.

Note If you have had a felony arrest, you can not proceed with the application process. If you have had a misdemeanor crime against person within the past 10 years, or any other misdemeanor arrest within the past 5 years, you may not proceed with the application process.

Instructions: Complete ALL sections and sign below. The information you provide will be used only as it relates to consideration for employment (paid and volunteer)

NAME	SOCIAL SECURITY NUMBER
POSITION APPLIED FOR	

CRIMES AGAINST PERSONS AND CRIMES RELATING TO FINANCIAL EXPLOITATION

Have you ever been convicted of any of the crimes listed below? NO YES - If yes, check all that apply and describe in space below.

- | | | |
|---|--|---|
| <input type="checkbox"/> Arson | <input type="checkbox"/> Extortion | <input type="checkbox"/> Promoting Prostitution |
| <input type="checkbox"/> Assault, Custodial | <input type="checkbox"/> Forgery | <input type="checkbox"/> Prostitution |
| <input type="checkbox"/> Assault, Simple | <input type="checkbox"/> Incest | <input type="checkbox"/> Robbery |
| <input type="checkbox"/> Assault | <input type="checkbox"/> Indecent Exposure-Felony | <input type="checkbox"/> Rape |
| <input type="checkbox"/> Burglary | <input type="checkbox"/> Indecent Liberties | <input type="checkbox"/> Rape of Child |
| <input type="checkbox"/> Child Abandonment | <input type="checkbox"/> Kidnapping | <input type="checkbox"/> Selling/Distr. Erotic Materials to a Minor |
| <input type="checkbox"/> Child abuse or Neglect | <input type="checkbox"/> Malicious Harassment | <input type="checkbox"/> Sexual Exploitation of a Minor |
| <input type="checkbox"/> Child Buying or Selling | <input type="checkbox"/> Manslaughter | <input type="checkbox"/> Sexual Misconduct with a Minor |
| <input type="checkbox"/> Child Molestation | <input type="checkbox"/> Murder, Aggravated | <input type="checkbox"/> Theft |
| <input type="checkbox"/> Communication with a Minor | <input type="checkbox"/> Murder | <input type="checkbox"/> Unlawful Imprisonment |
| <input type="checkbox"/> Criminal Abandonment | <input type="checkbox"/> Patronizing a Juvenile Prostitute | <input type="checkbox"/> Vehicular Homicide |
| <input type="checkbox"/> Criminal Mistreatment | <input type="checkbox"/> Promoting Pornography | <input type="checkbox"/> Violation of Child Abuse Restraining Order |
| <input type="checkbox"/> Custodial Interference | <input type="checkbox"/> | <input type="checkbox"/> |

Explanation of Violation(s):

X

SIGN HERE

DRIVING RECORD EVALUATION

This form must be completed to be considered for employment

All applicants for career and volunteer positions with West Thurston Regional Fire Authority will have their driving records evaluated. West Thurston Regional Fire Authority uses the violation points system listed below. If your permanent driving record reflects a total of six (6) points or more for a period of 36 months (3 years) preceding the date of your application, you will not be allowed to continue the process. Therefore, if you know that your driving record is less than six points, you may apply. However, any new violations that occur before the completion of the probationary process, which put your total score over six points will disqualify you. Annual evaluation of a member's driving record may be made during a member's employment or volunteer service. Any current member found in violation of this evaluation will result in the suspension of the driving privileges and/or termination of employment with West Thurston Regional Fire Authority .

Violations	Points
Revocation of Driver's License	8
Denial of Issuance of Driver's License	8
Negligent Homicide	8
Driving while Intoxicated (involving an accident)	8
Driving while Intoxicated (not involving an accident)	6
Reckless Driving (involving an accident)	8
Reckless Driving (not involving an accident)	6
Negligent Driving (involving an accident)	5
Negligent Driving (not involving an accident)	4
Hit and Run (attended, occupants in vehicle)	8
Hit and Run (unattended, no occupants in vehicle)	6
Driving while license is Suspended (DWLS)	4
<i>Speeding in Excess of the Posted Limit:</i>	
0-14 mph over	2
15-19 mph over	3
20-25 mph over	4
26 mph and over	5
<i>Convictions of forfeitures for other moving violations:</i>	
Each Violation Involving an Accident	4
Each Violation not Involving an Accident	2

RCW - Employer

RCW 46.52.130 Abstract of driving record -- Access -- Fees – Penalty.

(1) A certified abstract of the driving record shall be furnished only to: (a) The individual named in the abstract; (b) An employer or prospective employer or an agent acting on behalf of an employer or prospective employer, ...

(6) Upon proper request, a certified abstract of the full driving record maintained by the department shall be furnished to ... the individual named in the abstract, to an employer or prospective employer or an agent acting on behalf of an employer or prospective employer of the named individual, ...

(7) The abstract, whenever possible, shall include: (a) An enumeration of motor vehicle accidents in which the person was driving; (b) The total number of vehicles involved; (c) Whether the vehicles were legally parked or moving; (d) Whether the vehicles were occupied at the time of the accident; (e) Whether the accident resulted in any fatality; (f) Any reported convictions, forfeitures of bail, or findings that an infraction was committed based upon a violation of any motor vehicle law; (g) The status of the person's driving privilege in this state; and (h) Any reports of failure to appear in response to a traffic citation or failure to respond to a notice of infraction served upon the named individual by an arresting officer. ...

(10) The director shall collect for each abstract the sum of ten dollars, fifty percent of which shall be deposited in the highway safety fund and fifty percent of which must be deposited according to RCW 46.68.038. ...

(12) Any employer or prospective employer or an agent acting on behalf of an employer or prospective employer, ... receiving the certified abstract shall use it exclusively for his or her own purpose: (a) To determine whether the licensee should be permitted to operate a commercial vehicle or school bus, ... upon the public highways of this state; or (b) For employment purposes related to driving by an individual as a condition of that individual's employment or otherwise at the direction of the employer or organization, and shall not divulge any information contained in it to a third party. ...

(15) Release of a certified abstract of the driving record of an employee or prospective employee, ... requires a statement signed by: (a) The employee or prospective employee, ... that authorizes the release of the record, and (b) The employer ... attesting that the information is necessary to determine: (i) To determine whether the licensee should be employed to operate a commercial vehicle or school bus, ... upon the public highways of this state; or (ii) For employment purposes related to driving by an individual as a condition of that individual's employment or otherwise at the direction of the employer or organization. If the employer or prospective employer authorizes an agent to obtain this information on their behalf, this must be noted in the statement.

(16) Any negligent violation of this section is a gross misdemeanor.

(17) Any intentional violation of this section is a class C felony.

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I hereby certify, under the penalty of perjury in the state of Washington, that this application contains no willful misrepresentation and that the information given is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any such misrepresentation or falsification, my application may be rejected, my name may be removed from consideration or I may be discharged from my employment.

I authorize my current and former employers and all schools or educational and technical institutions which I have attended to provide Fire Department representatives any information regarding my current and former employment, including performance, discipline and attendance, scholastic records or ratings. I hereby release any such current or former employers or institutions, their agents or employees from any and all liability resulting from the release of such information. My authorization and release from liability are knowing, intelligent and voluntary acts. I hereby waive any claims against West Thurston Fire District No. 1 for relying on any information from my prior employers. I am willing to submit to a pre-employment physical examination if required.

I understand that as a condition of employment I must provide documentation to prove my eligibility to obtain employment along with personal identification information as required by the Immigration Reform and Control Act of 1986.

PLEASE SUBMIT A COPY OF YOUR SOCIAL SECURITY CARD AND DRIVER'S LICENSE UPON APPLICATION

I UNDERSTAND THAT MY APPLICATION WILL NOT BE CONSIDERED UNLESS IT IS SIGNED.

X

Date:

How did you find out about volunteer opportunities with West Thurston Regional Fire Authority?
