

**ENGLEWOOD AREA FIRE CONTROL
DISTRICT**

APPLICATION PACKAGE



“Desire to Serve – Courage to Act”

Candidate Application Packet Instructions

The candidate application packet must be completed and turned in prior to the candidate being eligible for the application process to begin. Along with the application required paperwork, the candidate **must** also provide the following documents along with their application:

- Copy of current & valid Driver's License
- Copy of High School Diploma or GED
- Copy of Florida State Minimum Standards Fire Certification*
- Copy of Paramedic Certification*
- Copy of CPR – Basic Life Support for Health Care Provider Card
- Copy of ALS Provider Card or equivalent (Paramedic only)
- Copy of any Fire or EMS related certificates
- If a veteran, copy of your DD-214

*** All certifications must be valid and current Florida certifications.**

Please follow these directions when assembling your application and documents:

- DO NOT staple, bend, or bind your personal materials in notebooks, sheet covers or other materials.
- Make certain that your name is **printed** clearly on each page.
- All pages must be standard 8.5" x 11" and paper clipped together.
- If you cannot get a copy of your High School Diploma, applicants can submit a copy of their transcript which indicates a date of graduation.
- Please print in black or blue ink. Pencil is not acceptable. If any item does not apply to you, write "N/A" or Not Applicable.
- All application paperwork must be delivered to the Englewood Area Fire Control District Administration office at 516 Paul Morris Drive, Englewood, FL 34223. Monday through Friday, 0800 hours to 1600 hours.

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above application are true and complete. I authorize the Englewood Area Fire Control District to verify this information and to obtain reference information by contacting educational institutions, references, or employers, and to rely on and use such information as they see fit. I hereby release the Englewood Area Fire Control District from all liability that could result from obtaining and having an employment decision based on this information. The application and all information submitted during this application process is the property of the Englewood Area Fire Control District.

I understand that if granted employment, falsified statements of any kind or omissions of facts called for on this application, regardless of time of discovery, shall be grounds for dismissal.

I understand that all medical information that is submitted is confidential and protected under Federal Law. I hereby agree to allow the Englewood Area Fire Control District to review this information for the employment process.

I understand that should an offer of employment be made to me and accepted by me, I will fully adhere to the Englewood Area Fire Control District's Rules and Regulations, General Orders, Standard Operating Procedures, Medical Treatment Protocols, and other such documents.

Printed Name of Applicant: _____

Signature of Applicant: _____

Date: _____

Englewood Area Fire Control District

Administration Center
516 Paul Morris Drive
Englewood, FL 34223



Phone: (941) 474-3311
Fax: (941) 473-2600
www.englewood-fire.com

Dear Applicant:

The Englewood Area Fire Control District is pleased that you are submitting your application for employment with our Fire District. We are committed in serving our community and in the training of our Firefighters.

The Englewood Area Fire Control District provides service to approximately 83 square miles. We operate six (6) Fire Stations that are strategically located. The Englewood Area Fire Control District sits within two counties, Sarasota, and Charlotte County. We provide fire suppression services, first response medical services, hazardous materials response and marine fire-rescue services and other related services to our community.

The Englewood Area Fire Control District also operates its own Fire Academy that provides state of the art Fire and Medical Training to our employees as well as conducting Florida minimum standards courses and the High School Fire Program for the Charlotte County School Board.

Your application and the required documentation are to be submitted to the Administration Center located at 516 Paul Morris Drive in Englewood, Florida. Office hours are Monday through Friday, 0800 hours to 1600 hours.

Again, thank you for your application and good luck!

Sincerely,

Kevin Easton
Fire Chief

Englewood Area Fire Control District

Administration Center
516 Paul Morris Drive
Englewood, FL 34223



Phone: (941) 474-3311
Fax: (941) 473-2600
www.englewood-fire.com

APPLICATION REFERENCE FOR: _____

Introduction: The above-named applicant has applied for employment with the Englewood Area Fire Control District. Members must be reliable, trustworthy, possess impeccable moral character, and be able to function as part of a team. They must be able to work within the command structure of the organization under stressful and sometimes hazardous conditions.

You are not required to be a reference. If you choose to act as a reference, the information you provide may be relied upon by the District, its Officers, and its Board of Commissioner in deciding on the prospective member's application. Your full and candid response is appreciated. This form should be returned directly to the Englewood Area Fire Control District in the stamp envelope provided by the applicant.

To the applicant: *Please complete Part 1 of this form and then send it to someone who knows you well and can provide an accurate and full account of your abilities, accomplishments, and personal qualities. Please provide this reference form and a stamped envelope addressed to the Englewood Area Fire Control District, 516 Paul Morris Drive, Englewood, Florida 34223, **Attention: Application Reference.***

PART 1 (to be completed by applicant)

Name: _____
Last First Middle

Mailing Address: _____

City State Zip Code

I hereby authorize the below reference to provide the requested background and personal information to the Englewood Area Fire Control District, its Officers, and its Board of Commissioners. I acknowledge that this completed reference is the property of the Englewood Area Fire Control District.

Applicant's Signature Date

Englewood Area Fire Control District

Administration Center
516 Paul Morris Drive
Englewood, FL 34223



Phone: (941) 474-3311
Fax: (941) 473-2600
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Applicant's Signature Date

PART 2 (to be completed by reference)

Name: _____
Last First Middle

Address: _____

City State Zip Code

How long and in what capacity have you known the applicant? _____

How frequently do you have contact with the applicant? _____

Please complete these ratings to the best of your ability:

	Below Average	Average	Good	Outstanding
Integrity				
Intellectual curiosity				
Motivation				
Self-confidence				
Respect				
Personality				
Leadership				
Reliability				
Trustworthiness				
Interpersonal skills				
Handles stress				
Reaction to criticism				

Do you wish to elaborate on any of these ratings? _____

Please offer any additional comments concerning this applicant's ability, character, and suitability for employment with the Englewood Area Fire Control District: _____

Englewood Area Fire Control District

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516 Paul Morris Drive
Englewood, FL 34223



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Last First Middle

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City State Zip Code

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	Below Average	Average	Good	Outstanding
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Englewood, FL 34223



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IMPORTANT DATES

PRACTICAL TEST

Date: TBD
Time: TBD
Location: Englewood Fire Training Center
13400 Haligan Way, Englewood FL 34223

ORAL INTERVIEW (by Invitation)

Date: TBD
Location: Englewood Fire Training Center
Time: Interviews start at 0800 hours. **Applicants must have passed the Practical exam to sit for an interview. Applicants will be given a time for their interview after testing.**

Completed applications must be turned into the Administrative Office located at 516 Paul Morris Drive, Englewood, Florida, 34223. If you have any questions, please contact Fire Chief Kevin Easton at (941)474-3311.

ENGLEWOOD AREA FIRE CONTROL DISTRICT

Administration Center
516 Paul Morris Drive
Englewood, FL 34223



Phone: (941) 474-3311
Fax: (941) 473-2600
www.inglewood-fire.com

APPLICATION FOR EMPLOYMENT

APPLICANT INFORMATION		Date:
Last Name	First	M.I.
Street Address		Apt/Unit #
City	State	Zip Code
Phone	Email Address	
Date Available		
Position Applied For		
Driver's License No. *		State Issued
Driver's License Class	Expiration Date	
* Please attach a legible copy of your Driver's License.		

EMPLOYMENT HISTORY (most recent first)	
Company	Phone
Address	Supervisor
Job Title	Employment from: to:
Responsibilities and Duties	
Reason for Leaving	
Salary	May we contact your employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No

EMPLOYMENT HISTORY	
Company	Phone
Address	Supervisor
Job Title	Employment from: to:
Responsibilities and Duties	
Reason for Leaving	
Salary	May we contact your employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No

EMPLOYMENT HISTORY	
Company	Phone
Address	Supervisor
Job Title	Employment from: to:
Responsibilities and Duties	
Reason for Leaving	
Salary	May we contact your employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No

EDUCATION		
High School		
Address		
From To	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree
College		
Address		
From To	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree
Other		
Address		
From To	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree

PERSONAL REFERENCES*Please list three personal references.*

Full name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	
Full name	Relationship
Company	Phone
Address	

BACKGROUND INFORMATION

Have you ever been employed by the Englewood Area Fire Control District?	If yes, when? From	To
Reason for leaving?	Position	
To the best of your knowledge, have you or anyone in your immediate family worked for an individual or company that provides goods or services to the District?	If yes, when? From	To
If yes, provide details.		
1) Have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please explain.	
2) Have you ever been convicted of or pled nolo contendere (no contest) to a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please explain.	
3) Have you ever been convicted of or pled nolo contendere (no contest) to a First-degree misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please explain.	
4) Have you ever been a defendant in a lawsuit involving an intentional tort? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please explain.	

5) Are you now on probation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, when? From _____ To _____
Reason		
6) Have you had a traffic violation in the last three years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please explain.
7) Has your driver's license ever been suspended or revoked?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please explain.

VETERANS' PREFERENCE INFORMATION

Only residents of the State of Florida are eligible for Veterans' Preference.

Are you a resident of the State of Florida who will be claiming Veterans' Preference?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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FOR FLORIDA RESIDENTS:	<input type="checkbox"/> No – I am not a Florida resident. <input type="checkbox"/> No – I do not qualify for Veterans' Preference. <input type="checkbox"/> Yes – I am a current employee and I have used my Veterans' Preference. <input type="checkbox"/> Yes – I am a Florida resident; I qualify for Veterans' Preference and I have attached my DD214.
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Are you claiming Veterans' Preference?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If eligible for Veterans' Preference, which Veterans' Preference Category are you claiming? <input type="checkbox"/> Veterans' Preference Category 1 <input type="checkbox"/> Veterans' Preference Category 2 <input type="checkbox"/> Veterans' Preference Category 3 <input type="checkbox"/> Veterans' Preference Category 4 <input type="checkbox"/> Veterans' Preference Category 5	
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If you stated that you were "a veteran of any war. . .". Please indicated the war here: <input type="checkbox"/> WWII: December 7, 1941 thru December 31, 1947 <input type="checkbox"/> Korean Conflict: June 27, 1950 thru January 31, 1955 <input type="checkbox"/> Vietnam Era: February 28, 1961 thru May 7, 1975 <input type="checkbox"/> Persian Gulf War: August 2, 1990 thru January 2, 1992 <input type="checkbox"/> Operation Enduring Freedom: October 7, 2001 to be determined. <input type="checkbox"/> Operation Iraqi Freedom: March 19, 2003 to be determined
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IMPORTANT INFORMATION

- 1) Englewood Area Fire Control District does not discriminate based on race, religion, color, sex, age, notional origin, marital status, or disability. A job applicant with a disability who requires reasonable accommodation to participate in the application/selection process is required to make known the need for an accommodation to the appropriate District staff members.
- 2) Your application will **not** be considered unless complete answers are provided to all questions on this application. Resumes may be submitted as supplements but cannot be accepted in lieu of any part of this application.
- 3) An employee appointed to fill an established position on a full-time or part-time basis will be given Probationary Status for a period designated for the class. During this probationary period any requirements for license(s), certificate(s) and training as stipulated in the Minimum Qualifications for the class (position description) or Englewood Area Fire Control District's Rules and Regulations must be successfully completed. The probationary period may be extended at management's discretion. Management reserves the right to separate employees in the initial probationary period without the right to procedural due process in accordance with the District's Rules and Regulations.
- 4) Englewood Area Fire Control District makes every effort to accommodate individual preferences. However, work needs, District emergency preparedness (such as hurricanes) and schedule changes may make the following conditions mandatory, overtime, shift work, a rotating work schedule other than Monday through Friday, job reassignments and locations.
- 5) Successful completion of a driver license background check is a requirement for employment. Employment offers to successful candidates are conditional. Candidates given a conditional offer of employment are required to consent to and pass a pre-employment criminal background check, a pre-employment physical examination and a pre-employment substance screening test. A credit report may be required for certain positions. If so, you will be asked to sign a separate release in compliance with the Fair Credit Reporting Act at the time of offer.
- 6) All applicants accepted for employment must be in possession of an official social security card and must have demonstrated their eligibility to work according to Federal Law.
- 7) Certain positions with the Englewood Area Fire Control District may require the applicant to be eligible for bonding, eligibility for bonding will be consideration for determining an applicant's fitness for such position.
- 8) A false answer or a material omission to any question in this application may be grounds for not employing you, or for dismissing you after you begin work, which may negate continuing benefits for which you may otherwise be eligible.

APPLICANT'S AFFIRMATION

I understand that the Englewood Area Fire Control District may verify employment and education credentials at any stage at any stage of the hiring process. I hereby give the Englewood Area Fire Control District permission to make a thorough investigation of my entire work and educational records and to verify all other data I have provided, except where otherwise indicated. It is my understanding that this application, by law, will become public record when submitted and that the Fire District cannot guarantee me its confidentiality. I further understand that if employed, other potential employers may contact the Fire District from time to time for job-related information. I hereby authorize the Fire District from time to time, for job-related information. I hereby authorize the Fire District to provide factual job-related information to potential employers upon request. I have read and understand all of the information and agree to the terms provided herein and I hereby release the Englewood Area Fire Control District and others from any liability which may result from furnishing the information requested above. All requests for information have been completed as fully and accurately as possible and I recognize that any material misrepresentation or pertinent omissions of fact in my application may disqualify me from employment with the Englewood Are Fire Control District.

Sincerely _____

Dated _____

TOBACCO AFFIDAVIT

PLEASE TYPE OR PRINT LEGIBLY.			
NAME - LAST	FIRST	MI	DATE OF BIRTH
HOME ADDRESS	CITY	STATE	ZIP CODE
E-MAIL ADDRESS		CONTACT	

I confirm I have been a nonuser of tobacco or tobacco products for at least one year immediately preceding application as required by Florida Statute 633.412.

SIGNATURE

DATE

STATE OF FLORIDA

COUNTY OF _____

On _____, _____, _____ personally
(MONTH AND DAY) (YEAR) (APPLICANT'S NAME)

appeared before me and, _____ who is personally know to me, or _____ who has provided

_____ as identification.

Notary Public Signature

Commission Expires _____

(Please affix Seal Above)