

APPLICATION FOR EMPLOYMENT



PORTLAND FIRE DEPARTMENT
595 Buddy Ganem
Portland, Texas 78374
(361) 643-0155
www.portlandtx.com

Application for Fire Fighter

INSTRUCTIONS TO APPLICANTS

Thank you for your interest in employment with the City of Portland. This application form is an important step in a process that will allow the Fire Department to select a qualified individual for employment. It is very important that you complete the form accurately and completely. Print legibly or type your application.

The City of Portland is an equal opportunity employer. The City complies with Title VII of the Civil Rights Act of 1964, as amended, and does not discriminate on the basis of race, religion, color, sex, or national origin. The City complies with all provisions of the Americans with Disabilities Act. If, because of a disability, you require assistance in completing this application or require special assistance during the application process, you may contact the fire department at (361) 643-0155.

The selection process is designed to be fair to all applicants. Applicants for some positions may undergo written testing and/or oral interviews depending on the position.

Applicants who are selected to proceed after the physical agility testing will be notified by telephone as to the date and time of the oral interviews. After completing the agility testing, applicants should not attempt to call the department for test results. Applicants who are not selected for oral interviews will be notified by mail.

The City may reject an applicant or terminate an employee for falsifying an employment application at any time after the falsification is discovered. Omission of pertinent information with the intent to conceal a fact is considered a falsification.

The City reserves the right to abandon the application process at any time and to re-advertise for new or additional applicants.

If an advertisement for a position includes an return deadline for applications, no application will be accepted after the deadline. Applicants returning an application packet by mail should mail early to insure arrival by the deadline. The City assumes no liability for delays in delivery by the U. S. Postal Service or other parcel delivery service.



Application Requirements

You must meet the following minimum requirements to apply for this job

- Must meet the job description requirements for the position applied for.
- Must be certified as a basic structural fire fighter by the Texas Commission on Fire Protection.
 - If not currently certified by the Texas Commission on Fire Protection, must be within 90 days of receiving fire certification.
- Must be certified as an Emergency Medical Technician by the Texas Department of Health.
- Must possess a high school diploma or G.E.D.
- Must possess a valid Texas driver's license and pass the Class B fire fighter's exemption within the first six months of hire.
- Must be in good physical condition, weight in proportion to height.
- When a written test is required, must score a minimum of 70% on the written examination.
- Must pass a Physical Assessment Test.
- Must successfully pass an investigation of personal history and background to determine suitability for the position of fire fighter with the Portland Fire Department.
- Must pass a drug screening examination.
- Must pass an oral interview board.
- Must reside within 25 road miles of the administrative offices of the Portland Fire Department located at 595 Buddy Ganem, Portland, Texas. Such residency is required within 30 days from start date.



JOB DESCRIPTION

Job Title: Fire Fighter
Reports to: Fire Chief

DESCRIPTION

Performs the essential duties of a fire fighter in the Fire Department, City of Portland. Assists apparatus driver in pump operations; forces entry into fire site; applies necessary extinguishing agents using required devices to extinguish fires as directed; inspects extinguished fire site to ensure against re-ignition of fires; cleans premises and salvages property damaged by fire and water; inventories all equipment for safe return to fire station; performs first aid and rescue duties at fire site and in other public places to support public safety measures; maintains fire apparatus in good condition; aids in cleaning and maintaining station house and furnishings; participates in fire training drills; practice exercises and courses; assists in maintenance and inspection of fire hydrants and inspection of commercial buildings to ensure compliance with the fire code; provides information to the public regarding fire hazards and safety procedures; performs other activities as required.

ESSENTIAL FUNCTIONS:

1. **Fire Fighting:** Operates and advances charged hose lines, master stream appliances and fire extinguishers from defensive positions or while advancing toward the fire area in order to extinguish the fire, while wearing full turn out gear. Pries open doors or windows, makes forcible entry into doors, breaks windows or otherwise forcibly enters buildings and vehicles in order to search for and rescue victims and provide access to the fire for offensive fire fighting, using axes, pry bars, pike poles, and/or all other available tools, while wearing full turnout gear.
2. **Rescue/Extraction/Search:** Searches fire area in order to locate victims, while wearing full turnout gear, following standard search procedures. Assists, carries or drags victims from emergency area by means of interior access (stairs, hallways, etc.) or if necessary ladders, fire escapes, platforms or other means of escape. Extricates victims from vehicles, cave-ins, collapsed buildings or other entrapments in order to save lives or remove bodies, using shovels, torches, drills, pry bars, saws, jacks or other equipment.
3. **Transporting Supplies and Equipment:** Carries hose, tools, extinguishers, air tanks, and other supplies or equipment, up and down stairs or across long distances in order to fight fires or provide assistance in buildings, isolated locations or limited access areas, (possibly) while wearing full turnout gear.
4. **Handling Hose Lines:** Lays and advances hose lines and connects hose couplings, nozzles, and master stream appliances in order to supply water for fire fighting, using Siamese, wyes, stand pipe kits, ropes, hose tools, and other equipment, while wearing full turnout gear.

5. Ventilation: Opens or breaks windows, chops or cuts ventilation openings in roofs, breaches walls or doors and uses fans as directed in structures, in order to remove heat, smoke and gas from burning buildings, using ground ladders, roof ladders, axes, pike poles, roof cutters, saws, battering rams, sledge hammers, fans, fog streams and other equipment, while wearing full turnout gear.
6. Salvage/Overhaul: Moves and covers furniture, appliances, merchandise and other property, covers holes in buildings and redirects or cleans up water, in order to minimize damage, using plastic and canvas covers, refrigerator straps, ropes, mops, squeegees and other tools. Pulls down walls and ceilings, cuts or pulls up floors and moves or turns over debris, in order to check for embers or flames and prevent rekindling or further spread of the fire, using pike poles, axes, saws, hooks, or other equipment (possibly) while wearing full turnout gear.

ADDITIONAL PHYSICAL FACTORS:

1. Hear Within a Normal Range: The fire fighter is required to have good hearing in order to be able to listen to instructions from the radio, conversations with background noise, sounds of traffic, breaking glass, warning shouts, suspicious noises, ringing telephones, screams or other sounds of potential danger.
2. Have Good Vision: The fire fighter is required to have good visual acuity, night vision, depth perception and peripheral vision, with the ability to distinguish colors. The fire fighter is constantly watching individuals, buildings, traffic or crowds of people. The fire fighter must have good depth perception in order to drive emergency vehicles at high speeds. The fire fighter must have at least normal peripheral vision in order to detect potential dangers. The fire fighter is expected to work either day or night and must be able to effectively see at night or during periods of reduced visibility caused by smoke and fire.
3. Detect Odors: A fire fighter is required to have unimpaired olfactory faculties. He must be able to smell the smoke from fires, various types of gas leaks or other distinctive odors.
4. Stand: A fire fighter is required to stand for long periods of time while conducting fire suppression activities.
5. Walk: A fire fighter is required to walk on sidewalks and streets, through houses, buildings, vacant lots and fields. A fire fighter is required to walk on rough, rocky, sandy, muddy, hilly, wet, slippery, sloped or other surfaces often while stepping over or around obstacles.
6. Feel or Touch: A fire fighter is required to feel walls/doors or other objects to detect heat from unseen fires.
7. Climb: A fire fighter is required to climb up and down stairs, over chain link or wooden fences up to eight feet high, through windows, on top of cars or trucks, onto roofs of buildings, houses or ladders.

8. Jump: A fire fighter is required to jump horizontally and vertically. A fire fighter jumps horizontally to hurdle ditches or mud holes and vertically to vault furniture, fences, short obstacles or jump down from fences, vehicles or other elevated areas the fire fighter may have climbed on.
9. Bend/Crouch/Kneel: A fire fighter is required to get in and out of fire apparatus unassisted, kneel, bend or crouch to look under low objects such as furniture and cars. The fire fighter must kneel, bend or crouch to assist ill or injured people.
10. Crawl: A fire fighter is required to crawl through small openings, under, over or around obstacles in order to fight fires and or rescue injured individuals.
11. Lift and Carry: A fire fighter is required to lift and carry conscious and unconscious people weighing up to 200 pounds onto stretchers or to places of safety up to 100 feet.

ENVIRONMENTAL FACTORS:

Eight hour shifts or twenty-four hours shift with 48 hours off; field conditions; exposure to extreme weather conditions, individuals with contagious diseases and hazards associated with emergency driving. The fire fighter is exposed to a number of hazards including: chemical, toxic wastes, fumes, mechanical, explosive and extreme temperature swings.

Because of the element of danger present in fighting fires or emergency rescue there is a high stress level which must be coped with.

VEHICLES, MACHINERY, EQUIPMENT, TOOLS, AND TECHNOLOGY USED TO DO THIS JOB:

1. Drive emergency vehicles under emergency conditions.
2. Power plants
3. Saws
4. Extrication tools
5. Ladders
6. Ventilation equipment
7. Breathing apparatus
8. Light and electrical cords
9. Axes
10. Lawn mowing equipment
11. Weed eaters
12. Edgers
13. Fire hoses
14. Radios
15. Computers

KNOWLEDGE, SKILLS, ABILITIES:

1. Read English: A fire fighter is required to read instructions, reports, directions and written orders, bulletins and a myriad of other written and printed materials.
2. Write English: A fire fighter is required to write reports, letters and memoranda.
3. Effectively Communicate Orally in English: A fire fighter is required to be able to speak clearly and concisely and have sufficient command of the English language to be able to communicate with people from all walks of life. A fire fighter must be able to give directions and instructions to people from all walks of life. A fire fighter is required to orally communicate with dispatchers and other fire fighters on the radio system to acknowledge calls and pass on information.
4. Demonstrate Integrity: A fire fighter must have high moral character. A fire fighter is required to be completely trustworthy. On and off duty, A fire fighter must behave in such a manner that creates community respect. A fire fighter must refrain from using a position or authority for personal gain and cannot succumb to temptations to take surreptitious advantage of the position. A fire fighter's personal and professional behavior must be exemplary so as not to detract from their credibility or veracity. A fire fighter must be free from a history of chronic or habitual drug abuse, involvement in the illegal sale of drugs or crimes of moral turpitude, all of which would tend to cast doubt on a fire fighter's integrity and honesty.
5. Demonstrate Self Control: A fire fighter is required to control all emotions in order to act quickly and calmly in emergency situations. A fire fighter must not over react to verbal abuse but control anger, fear or the desire to retaliate in order to take sound actions which will restore order. A fire fighter must maintain a high level of composure when involved in stressful or provocative situations. Under highly stressful and emotional situations, a fire fighter must remain calm and decisively make lucid decisions and take reasonable actions.
6. Demonstrate Situational Reasoning Ability: A fire fighter is required to demonstrate "Common Sense." A fire fighter must analyze situations, assess potential consequences of alternatives, and then make a logical decision without undue delay. When confronted with a dangerous situation, A fire fighter must be able to perform those functions quickly and decisively.
7. Demonstrate Interpersonal Skills: A fire fighter is required to anticipate how people will act in given situations and take action to encourage positive behavior. A fire fighter must be able to consider individual differences within a similar framework of facts. A fire fighter must be able to interact with a wide variety of people without arousing antagonism and be able to persuade others to behave in an alternative manner without giving offense. A fire fighter must be assertive when necessary without being overly abrasive but cooperative enough to work as a member of a team.

MINIMUM QUALIFICATIONS:

Must have a high school diploma or G.E.D.; be at least 18 years of age; must have a valid Texas driver's license; must be a U.S. citizen; must be of good moral character and integrity; must possess a current fire fighter's certification issued by the Texas Commission on Fire Protection, or be within 90 days of receiving fire certification, and current Emergency Medical Technician certification issued by the Texas Department of Health and maintain such certification as a condition of employment.

LICENSE, CERTIFICATIONS REQUIRED BY ESSENTIAL FUNCTIONS:

1. A Class "B" Fire Fighters exempt Texas Drivers License
2. Texas Fire Fighters Certification
3. Emergency Medical Technician issued by Texas Department of State Health Services

Prepared by Portland Fire Department

June 18, 2019

Approved:

Randy L. Wright

City Manager

Jeff Morris

Fire Chief



Portland Fire Department
Application and Personal History Statement



Applicant's Name: _____

Important! Read these Instructions Carefully

These instructions are provided as a guide to assist you in properly completing your Application and Personal History Statement. IT IS ESSENTIAL THAT THE INFORMATION BE CORRECT AND COMPLETE!

Your Application and Personal History Statement will be used as the basis for a background investigation that will determine your eligibility for the position for which you are applying.

1. Your Application and Personal History Statement should be typewritten if possible. (This is a fillable form)
2. Answer all questions completely. If a question does not apply to you, enter "N/A" in the space provided.
3. Avoid errors by reading the directions carefully before making any entries on the form. Be sure your information is correct and in sequence, before you begin.
4. You are responsible for obtaining correct addresses (including zip codes). If you are not sure of an address, check it by personal verification. Your local library may have directory service or copies of the required directories. Include the area code on all telephone numbers.
5. If there is insufficient space on the Application and Personal History Statement form, attach extra sheets. Be sure your name is on the page and reference the relevant section and question the information refers to.
6. **Print a copy of the completed Application and Personal History Statement and have it notarized before turning it in at the Portland Fire Department at 595 Buddy Ganem, Portland, Texas 78374.**

Your failure to complete this document accurately and thoroughly may result in the rejection of your application. Any misstatement or misrepresentations, including omitted information, given in the Application and Personal History Statement or interview(s) may result in the rejection of your application and/or immediate termination, without right of appeal, unless subject to an appeal pursuant to the City's Personnel Rules.

If you have any questions regarding the required information, contact the Administrative Assistant's office prior to returning the document. You may reach that office from 8a.m. to 5p.m., Monday through Friday by contacting Ana Mooney at (361) 643-0155.

Attach copies (not originals) of the following documents to your completed Application and Personal History Statement.

1. Driver's License (For Identification Purposes Only) and Social Security Card
2. Copy of High School Diploma or Equivalency Certification and/or College Diploma
3. Licenses and/or proof of certification
4. DD214
5. Training documentation

Information provided in this section is used for identification purposes only and will not be used against you in the employment process.

Name: _____
Last First Middle

Other Names Used: Maiden, Adoption, Etc. _____

Home Address: _____
Street Name City State Zip

Home Phone No.: _____

Social Security No.: _____ Are you legal to work in the U.S.? Yes No

Driver's License: _____
Number State of Issue Expiration Date

Telephone Number where you can be reached between 8 a.m. and 5 p.m. M/F:

Email Address: _____

EDUCATIONAL HISTORY

High School Attended:

School Name	Location (City and State)	Dates Attended	Diploma

Colleges attended:

Name of College	Dates Attended	Credit Hours	Degree Type

Have you ever been expelled for disciplinary reasons from any school you have attended? Yes No

School: _____ Dates: _____

Reason:

Have you ever been placed on academic probation? Yes No

School: _____ Dates: _____

School: _____ Dates: _____

School activities: (Clubs, Sports, Etc.).

Positions of Leadership: (Indicate position / organization / dates held)

EMPLOYMENT HISTORY

Beginning with your present or most recent job, list all of the jobs you have had since the age of 17. Include all part-time, temporary or seasonal positions. Attach additional pages, if necessary.

A JOB IS ANY POSITION YOU ACCEPTED REGARDLESS OF HOW LONG YOU ACTUALLY WORKED!!!

POSITION 1

Check appropriate job description(s) Full-Time Part-Time Temporary Seasonal

Employer: _____

Employer's Address: _____

Employer's Phone No.: _____

Employment began on _____ Date Ended on _____ Date =Total Time _____

Name of Co-Worker _____

Position held with company / duties and responsibilities:

Title _____

Duties / Responsibilities:

Time in position(s): _____

Did you receive job performance evaluations while at this company? Yes No

Name of final supervisor: _____ Are you eligible for rehire? Yes No

Reason for leaving this position:

INVESTIGATOR'S NOTES:

POSITION 2

Check appropriate job description(s) Full-Time Part-Time Temporary Seasonal

Employer: _____

Employer's Address: _____

Employer's Phone No.: _____

Employment began on _____ Date Ended on _____ Date =Total Time _____

Name of Co-Worker _____

Position held with company / duties and responsibilities:

Title _____

Duties / Responsibilities:

Time in position(s): _____

Did you receive job performance evaluations while at this company? Yes No

Name of final supervisor: _____ Are you eligible for rehire? Yes No

Reason for leaving this position:

INVESTIGATOR'S NOTES:

POSITION 3

Check appropriate job description(s) Full-Time Part-Time Temporary Seasonal

Employer: _____

Employer's Address: _____

Employer's Phone No.: _____

Employment began on _____ Date Ended on _____ Date =Total Time _____

Name of Co-Worker _____

Position held with company / duties and responsibilities:

Title _____

Duties / Responsibilities:

Time in position(s): _____

Did you receive job performance evaluations while at this company? Yes No

Name of final supervisor: _____ Are you eligible for rehire? Yes No

Reason for leaving this position:

INVESTIGATOR'S NOTES:

POSITION 4

Check appropriate job description(s) Full-Time Part-Time Temporary Seasonal

Employer: _____

Employer's Address: _____

Employer's Phone No.: _____

Employment began on _____ Date Ended on _____ Date =Total Time _____

Name of Co-Worker _____

Position held with company / duties and responsibilities:

Title _____

Duties / Responsibilities:

Time in position(s): _____

Did you receive job performance evaluations while at this company? Yes No

Name of final supervisor: _____ Are you eligible for rehire? Yes No

Reason for leaving this position:

INVESTIGATOR'S NOTES:

PERIODS OF UNEMPLOYMENT

Record any periods of unemployment, since graduating from high school. (A period of unemployment is any time you did not have a job.)

From (Mo. / Yr.)	To (Mo. / Yr.)	Length of Unemployment

If you were a full-time college student and held only seasonal employment during school breaks, just indicate your beginning and ending school dates.

Indicate that you were a full-time student, and do not give a length of time for your unemployment. In the work history section, list the jobs you worked.

MILITARY SERVICE

Have you registered with selective service? Yes No When? _____

Have you ever been a member of any branch of the U.S. Armed Forces? Yes No

Branch of Service: _____ Highest Rank Obtained: _____

Induction date: _____ Discharge date: _____

Type of Discharge: _____

A dishonorable discharge is not an absolute bar to employment and other factors will affect the decision to hire or not to hire a civilian candidate. Officer candidates must have an honorable discharge or serve under honorable conditions to be considered for employment.

Awards: (Type and Date)

Special Schools / Training:

Have you ever been reduced in rank? Yes No When? _____

Reason: _____

While in the military service, were you ever arrested for an offense, which resulted in a trial by captain's mast, or by summary, special or general court-martial? Yes No

If yes, give date, place, law enforcing authority or type of court or court martial, charge and action taken for each incident.

Charge: _____ Date: _____

Results: _____

Charge: _____ Date: _____

Results: _____

Last duty station and name of commanding officer:

Are you currently a member of a U.S. Reserve or National or State Guard organization? Yes No

Branch of service: _____ Grade and Service # _____ Are you: Inactive Standby

Organization / Station / Unit and Location: _____

CRIMINAL CONVICTIONS

Have you ever been convicted of any crime, or received deferred adjudication, community supervision or probation for any offense including, but not limited to, driving while intoxicated or driving while under the influence? (All applicants, unless otherwise prohibited by law, will be subject to a criminal history check. Convictions or other criminal history may be relevant if job related, but does not necessarily bar you from employment.)

If yes to any of the above, explain each incident (list juvenile as well as adult occurrences).

DRIVING RECORD

How many moving citations have you received since you began driving? _____

How many moving citations have you received in the past three years? _____

Have you ever driven a motor vehicle, since your 17th birthday, without a valid driver's license?
Yes No

Have you ever driven a motor vehicle, within the past three years, without proper insurance?
Yes No

Have you ever had your driver's license suspended? Yes No

Date of Suspension: _____ Type of Suspension: _____ Date Lifted: _____

List, to the best of your memory, all driving citations you have received.

Date	Location	Brief Description	Disposition (Paid, N.G., Etc.)

List all accidents in which you were involved as a driver:

Date	Location	Brief Description

DRIVING RECORD (continued)

Have you ever had your driver's license placed on probation for receiving an excessive number of traffic violations? Yes No

Have you ever had a hearing for probation / suspension, etc? Yes No

Have you ever had your insurance revoked, due to the number of traffic citations you have received? Yes No

Have you ever knowingly driven a motor vehicle, after your driver's license was suspended /or after it had been revoked? Yes No

Do you have a valid driver's license in more than one state? If so, list:

Have you ever been denied a driver's license for any reason? Yes No

Have you ever been involved in an accident and then left the accident scene without identifying yourself? Yes No

Have you ever been involved in an accident, when you were driving, after you had been drinking any type of alcoholic beverage? Yes No

Have you ever been arrested for driving while intoxicated in this or any other state? Yes No

Have you ever struck an unattended vehicle, and then left without leaving identification?
Yes No

PERSONAL DECLARATIONS (SINCE 17-YEARS OF AGE)

Drug use covers all descriptive terms used to describe the ingestion of any of the listed types into a person's system. Example: experimented, tried, etc.

Have you ever used:

	YES	NO	Approx. First Date Used	Approx. Last Date Used	Have you ever possessed in any way?
PCP					
Angel Dust					
Marijuana					
LSD					
Peyote					
Mescaline					
Heroin					
Cocaine/Crack					
Quaaludes					
Downers					
Tranquilizers					
Amphetamines/ Methamphetamines Speed/Crank					
Biphetamine					
Ecstasy/XTC Ice					
Preludin					
Dilaudid					
Talwin/PBZ					
Inhalants (glue/paint)					
Mushrooms (Psilocybin)					
Others					
Designer Drugs					
Anabolic Steroids					
Rohypnol (date- rape drug)					

PERSONAL DECLARATIONS (Cont.)

Have you ever sold any of the items specified on the previous page? Yes No

Which _____ When _____ # Times _____

Have you ever bought any of the items specified on the previous page? Yes No

Which _____ When _____ # Times _____

Have you ever deliberately inhaled (paint, glue, any petroleum product)? Yes No
When was the last time? _____

Have you ever been involved, in any way, in the manufacturing of an illegal drug? Yes No

What drug? _____

How were you involved? _____

Have you ever been involved in the sale or delivery of any illegal drugs to another person with or without profit to you? Yes No

Have you ever transported illegal drugs across a state or U.S. border? Yes No

Have you ever transported any illegal drug as a favor to someone else, or help in any manner in delivering any illegal drugs? Yes No

Have you ever participated in the manufacture of any illegal drugs? Yes No

Have you ever cultivated or grown any illegal drug or substance? Yes No

Alcohol Use:

Do you use alcohol products? Yes No

Have you ever been under the influence or drank alcohol during work, in violation of company policy or procedures? Yes No

Have you ever used over-the-counter medication for any purpose other than those listed in the directions? Yes No

Have you ever taken prescription medication not prescribed for you? Yes No

If yes, what type? _____

From whom (relation)? _____

When? _____

PERSONAL REFERENCES

List four (4) persons who know you well enough to provide current information about you. **Do not list relatives or past/present employers.**

Name		Occupation
Home Address		
Home phone #		
Work Phone#		
Years known	Briefly describe your relationship with this person	
Name		Occupation
Home Address		
Home phone #		
Work Phone#		
Years known	Briefly describe your relationship with this person	
Name		Occupation
Home Address		
Home phone #		
Work Phone#		
Years known	Briefly describe your relationship with this person	
Name		Occupation
Home Address		
Home phone #		
Work Phone#		
Years known	Briefly describe your relationship with this person	

MISCELLANEOUS INFORMATION

List your professional work-related memberships in groups, associations, or clubs:

Official Name of Organization	TYPE: (E.g. Trade, Business or job-related)	Office(s) Held	Dates of Membership	
			FROM	TO

Community Activities
Awards, Commendations or Items of Special Recognition:

Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties which you may be called upon to do or which require further explanation?

Yes No

If yes, explain

MISCELLANEOUS INFORMATION (Continued)

If you are fluent in a foreign language, indicate, in each area, your degree of fluency (excellent, good, and fair).

Language	Reading	Speaking	Understanding	Writing

List any other special skills or qualifications you may possess.

Special Qualifications and Skills

List any special licenses you hold (such as pilot, radio operator, scuba, etc.) showing licensing authority original date of issue, and date of expiration.

List any specialized machinery or equipment which you can operate.

Is there anything that would prevent you from fully performing the duties of a firefighter, including working weekends, holidays, evenings, or at night?

ACCURACY OF INFORMATION:

I have reviewed each page to make sure all parts are correct and complete. I understand that my eligibility will be based on the information contained on this application. I also understand that the City of Portland Fire Department is an at-will employer and that this document is not an offer of employment nor does it constitute an employment contract.

I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers to questions.

I am fully aware that any such misrepresentations, omissions, or falsifications will be grounds for immediate rejection of my application, or if hired, termination of my employment.

Signature of Applicant

Date

The City of Portland Fire Department is an equal opportunity employer; we do not discriminate based on gender, race, color, national origin, religion, or disability. If you need assistance at any time during the employment process, please notify the Administrative Assistant (Ana Mooney) 48 hours in advance by calling (361) 643-0155.

EMPLOYMENT APPLICATION SUPPLEMENT

TO THE APPLICANT: If you have been convicted (this includes deferred adjudication and/or a probated sentence) for misdemeanor or felony offense(s), please answer the following questions about this conviction. IF YOU HAVE HAD MORE THAN ONE CONVICTION, COMPLETE A SEPARATE FORM FOR EACH CONVICTION.

A conviction is not an absolute bar to employment and other factors will affect the decision to hire or not to hire a candidate.

Name: _____

When were you convicted? _____

Where were you convicted? _____

What were you charged with?

What was the outcome?

Probation: Starting _____ Ending _____

Jail or Prison:

Fine: \$ _____

Other: Explain: _____

If you were sent to a detention facility:

When did you start your sentence? _____

What was the name and location of the detention facility?

When were you released?

Paroled _____

Sentence completed _____

If presently on parole, when will your parole be finished? _____

VERIFICATION OF DOCUMENTATION

Document	Copy Attached (Yes or No)	Verified By Notary
Driver's License (Class _____) For Identification Purposes only		
Social Security Card		
HS Diploma/GED or HS Transcript		
College Diploma		
Military Discharge Papers		

Applicant: Please submit a copy of each of these documents that relate to you when you return your Application and Personal History Statement. Thank you.

Signature

Printed Name and Address

STATE OF TEXAS §

COUNTY OF _____ §

This instrument was acknowledged before me on the _____ day of _____, 20__ by _____.

Notary Public, State of Texas
My Commission expires:

[SEAL]

(Printed/Typed Name of Notary)



Portland Fire Department Physical Ability Assessment

Instructions:

DRESS: Candidates should wear appropriate workout attire; shorts and t-shirts are acceptable. Tennis shoes or rubber-soled sports shoes are recommended.

ANY CANDIDATE DRESSED INAPPROPRIATELY WILL NOT BE ALLOWED TO PARTICIPATE IN THE TESTING.

The physical agility test is designed to simulate the tasks fire fighters are required to perform during emergency situations and immediately after the emergency has been contained. The test will be conducted at Fire Station 2 in an area approved by the Chief. You will be required to wear a turnout coat, helmet, self-contained breathing apparatus (without face piece) and gloves during the entire physical test. The aerial climb will not be a timed event, but will require the candidate to do a continuous ascend or descend with less than a 10 second stop in any portion. The timed portion will start when the candidate touches the hose at the second event station. At no time will a candidate be allowed to run during an event or in-between the event stations.

If a candidate is unable to continue the event the time will continue to run until it reaches the disqualifying time. The only time the fire department staff will stop the event prior to the disqualifying time will be due to a medical problem or injury.

Aerial Ladder Climb

Equipment

Candidates will wear the following safety equipment as provided.

- Helmet
- Bunker Coat
- Gloves
- Rescue or Safety Harness

The candidate will climb to the top of a 75 foot ladder with the ladder positioned at a 70-degree incline. The candidate will perform this event while wearing a safety harness attached to a safety rope. The ascent will be complete when the candidate grabs the top rung, looks down, makes eye contact with the belay person. The descent will begin after confirmation of eye contact with the belay person. The belay person will signal by waving to the candidate when eye contact is made. This is not a timed event, but will require the candidate to do a continuous ascend or descend with less than a 10 second stop in any portion. This task is a pass or fail event. If the candidate fails this event, the test will be stopped and the candidate will not be allowed to participate in the rest of the test.

The candidate will fail if they:

1. Do not reach the top and grab the top rung
2. Stop more than three times for more than 10 seconds each
3. Cause the safety crew to belay due to a fall
4. Refuse to complete the climb
5. Do not make eye contact with the belay person upon reaching the top.

Event Station 1

Timing begins here.

Pull one end of a 1 3/4 inch uncharged hose line pre-connected with a nozzle a distance of 150 feet from the engine.



Portland Fire Department Physical Ability Assessment

Event Station 2

Drag a 1 3/4 inch charged hose line a distance of 100 feet around an obstacle to a designated point.

Event Station 3

Using a dead blow sledge hammer, the candidate must move a 165 lbs. I-beam from one end of the Keiser machine to the other end by striking the end of the I-beam. If the candidate strikes the I-beam with the handle, the candidate will be given a warning.

If the candidate strikes the I-beam again with the handle, the candidate will be disqualified. If the candidate pulls the I-beam with the head of the hammer the candidate will be disqualified.

Event Station 4

Make three threaded hose connections.

Event Station 5

Carry a saw a distance of 50 feet and place onto a platform.

If the saw is dropped during the carry, the candidate will be disqualified.

Event Station 6

Lift and carry a bundle of rolled 2 1/2 inch hose a distance of 200 feet.

Event Station 7

Simulated Ceiling Breach and Pull- using a ceiling breach device, the candidate will conduct four sets of five repetitions.

Event Station 8

Make four continuous trips of 100 feet carrying a roof ladder secured from a simulated engine company.

The candidate will be disqualified if the ladder is dropped during the event.

Event Station 9

Drag a 175-pound rescue mannequin a distance of 75 feet.

Timing ends here.

A successful time is at or below: 9:16:22

**PORTLAND FIRE DEPARTMENT
PHYSICAL AGILITY MEDICAL INFORMATION FORM**

NAME: _____ EXAM DATE: _____

ADDRESS: _____

PHONE NUMBER: _____ EXAM TITLE: _____

The physical agility test consists of a series of job related physical skills that are timed. The test is physically challenging and it is important for you to decide if you are in proper condition to participate. The test is not dangerous if you are in good physical condition, BUT you should not attempt it if you are in doubt. The City of Portland assumes no liability for injuries resulting from the test. You will be permitted to compete in the testing process only after answering the following questions, and reading, signing and dating the following Liability Waiver.

- | | | |
|--|-----|----|
| 1. Do you have any diseases of heart or lungs? | YES | NO |
| 2. Have you ever incurred any injuries to your arms or legs? | YES | NO |
| 3. Have you ever injured your back and/or do you have any spinal defects? | YES | NO |
| 4. If you have ever had a job connected injury or illness, do you have any permanent partial disability? | YES | NO |
| 5. Do you know of any physical reason why you should not take this agility test? | YES | NO |

If the answer to any of the above questions is YES, please explain the nature of the injury, disease, or condition in the following allowed space. If your answer to question #4 is YES, explain the extent of the permanent disability.

LIABILITY WAIVER

I certify that I have completed this Medical Information Form truthfully. I have not concealed any physical injury, disease or medical problem from the fire department evaluators. I further state that I have read the Fire Fighter Physical Agility Test Candidate Information Sheet and understand fully the tasks I will be required to perform during the physical agility phase of the examination process for the position of fire fighter. I hereby release the City of Portland and its agents from any liability for any injury that I may suffer during the Physical Agility Examination.

Signature: _____ Date _____



Applicant Data Record

Applicants and employees are considered before and during employment without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or handicap, or any other legally protected status. The City of Portland complies with EEO regulations.

This Data Record is included in your application package to comply with government record keeping, reporting, and other legal requirements. Periodic reports of this information are made to the government. The completion of the Data Record is optional. If you choose to volunteer to supply the requested information, please note that all Applicant Data Records are kept in a confidential file and are not a part of your Application for Employment or personnel file if you are hired.

PLEASE NOTE: YOUR COOPERATION IS VOLUNTARY, INCLUSION OR EXCLUSION OF ANY DATA WILL NOT AFFECT ANY EMPLOYMENT DECISION.

VOLUNTARY SURVEY

Government agencies at times require periodic report on the sex, ethnicity, handicap, veteran and other protected status of employees. This data is for statistical analysis with respect to the success of the Affirmative Action program. SUBMISSION OF THIS INFORMATION IS VOLUNTARY.

(Please Print)

NAME	DATE	
ADDRESS		
CITY	STATE	ZIP
SOCIAL SECURITY NUMBER		

CURRENT JOB:		
CHECK ONE:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
		Age: _____
CHECK ONE OF THE FOLLOWING: (Ethnic Origin)		
<input type="checkbox"/> White	<input type="checkbox"/> Hispanic	<input type="checkbox"/> American Indian/Alaskan Native
<input type="checkbox"/> Black	<input type="checkbox"/> Other	<input type="checkbox"/> Asian/Pacific Islander
CHECK IF ANY OF THE FOLLOWING ARE APPLICABLE		
<input type="checkbox"/> Vietnam Era Veteran	<input type="checkbox"/> Disabled Veteran	<input type="checkbox"/> Handicapped Individual