

LAGRANGE FIRE
DEPARTMENT

FIREFIGHTERS
APPLICATION

**LAGRANGE FIRE DEPARTMENT
CITY HALL
118 SOUTH MAIN
LAGRANGE, MO 63448**

INTRODUCTION

The LaGrange Fire Department members would like to thank you for taking your time to consider joining our organization. We are proud of our accomplishments and the honor the membership provides to the organization. We hold proud our tradition and if you are accepted for membership into our organization, you will be expected to uphold that same tradition and standards.

The information provided on this application is intended to assist you with your consideration for membership to the LaGrange Fire department. This information is intended to give you an idea of what to expect from us and what is expected of you. We hope the material also helps answer any questions that you may have regarding policies and procedures as they apply to persons apply to be a firefighter with our organization. Should you need additional information please feel free to contact any member of the department. You can also contact City Hall for the phone number of the fire chief.

VOLUNTEER FIREFIGHTER CAREER

A career as a firefighter can be both challenging and satisfying, but it is not the right choice for everyone. You should think carefully about the information that follows and take every opportunity to learn more about the fire service before applying to our organization. Once you have been accepted, you will be expected to perform all duties you are given and to serve for a long time. You might want to visit our fire station on any regular meeting night (every 1st Wednesday at 7:00 p.m.) to talk to any firefighter to find out what life as a volunteer firefighter is really like.

THE LIFE OF A FIREFIGHTER

Firefighting can be an extremely hazardous occupation. Those who choose it as a volunteer career will sometimes have no choice but to put their lives and personnel safety on the line for the safety and well being of their fellow firefighters and the citizens of our community. In addition to fighting fires, performing rescues and if so trained helping with medical calls, you will be required to perform maintenance, housekeeping, public education of fire safety and any other duty that is deemed by the officers of this department to be connected with or essential to the service of the citizens of this community.

This fire department is a paramilitary organization, in that it follows a strict chain of command with respect given to superior officers.

One of the most important characteristics that a person wishing to become a firefighter should have is the ability to work as a team member. Teamwork reduces the potential for injuries and loss of life, as well as increasing effectiveness in handling emergency situations. Cooperation is a key word for firefighters. Since

firefighters on the department are on call 24 hours a day, it is important that you get along easily with our peers. A good sense of humor is also helpful, as few escape taking their turn at being the object of jokes and teasing.

DUTIES OF A FIREFIGHTER

The tasks, which a firefighter must perform, are varied and many of them are strenuous. A firefighter must be able to perform all the tasks, which are essential to the job.

At a fire, a firefighter, under the direction of company officers, may be called upon to lay hose, sometimes for considerable distances to reach a fire. They may carry hose packs or other essential equipment up flights of stairs. They control and advance hose, which are discharging, water onto the fire. As they move through burning buildings, they wear facemasks, heavy protective gear and carry air tanks on their backs. They must proceed on hands and knees in order to stay where heat and smoke are the least. They search, by sound and touch for victims of fire. They remove victims to safety using various routes and methods.

Firefighters at a fire scene may be called upon to carry and raise ladders long enough to reach windows or roofs on the 2nd and 3rd floors. They climb the ladders, often carrying powers saws or roof ladders in addition to their axes and pike poles. In order to allow heat to escape from burning buildings, they chop or saw holes, often while braced on pitched roofs.

A firefighter's duties are not limited to fighting fires. This department also performs rescues from a variety of emergencies and extrication of victims from vehicles or equipment at accident scenes. A firefighter's duties however, are not all adventures. They must maintain the fire equipment and vehicles so that they function reliably and are always ready to go within seconds after the alarm is received. Work performed on this equipment and vehicles include washing, checking and testing. They have the responsibility for cleanup at the scene of an incident. They search anywhere that a smoldering remnant of fire may be concealed, penetrating walls and ceilings the pike poles to eliminate any possibility of reigniting. They aid any Fire Marshall at a scene in the investigation of a suspicious fire. This includes cleaning away burnt debris to determine causes of the fire.

QUALIFICATIONS

You may fire an application t become a firefighter only if you meet the following requirements:

- A) Minimum age of 18 and graduated high school.
- B) US citizen

- C) **Physically able to perform firefighter tasks (pass a physical evaluation by our Physician)**
- D) **Reside within the departments fire response area.**

PROCEDURE OF MAKING APPLICATION

The following is the procedure for applying for the LaGrange Fire Department:

- A) **Fill in all of the required information on the application**
- B) **Obtain the required signatures**
- C) **Return the completed application to City Hall or Fire Chief.**

The following is the procedure in which the Fire Department handles your application:

- A) **The application is given to the fire officers for review.**
- B) **The officers make sure the application is completed with the required information and signatures.**
- C) **The officers request a background investigation from the LaGrange Police Department.**
- D) **Once the background information is received, the application and background information is then presented to the firefighters for approval. The applicant must be present for that meeting.**
- E) **If firefighter approval is obtained, the applicant is then sent for a medical evaluation, drug and pulmonary tests.**
- F) **If the physical examination indicates no problems, the applicant will then need to be sworn in by the Mayor and can begin active duty with the fire department.**

LAGRANGE FIRE DEPARTMENT
(FIREFIGHTER APPLICATION)

Badge# 7 _ _

INSTRUCTIONS: All information blanks must be filled out and all required signatures obtained before returning application to City Hall or Fire Chief.
PLEASE PRINT:

APPLICANT

Name: _____

(Last)

(First)

(Middle)

Residential Address: _____

Residential Phone #: _____ Hours Available: _____

PERSONAL INFORMATION

Birth date: _____ Social Security #: _____

Driver's License #: _____

Married: Yes _____ No _____ Height _____ Weight _____ Blood type _____

List Education (academic or technical) _____

List any previous fire service training or fire service experience: _____

List any pervious First responder, EMT or Paramedic Training or experience: _____

EMPLOYMENT INFORMATION:

Employer's Name: _____

Address of Employment: _____

Employer's Telephone #: _____

Occupation: _____ Length of Employment: _____

EMPLOYER VERIFICATION OF MEMBERSHIP: I do hereby signify that this application is made with my knowledge and consent. I further agree that the above named applicant will _____ will not _____ be able to answer emergency calls while working.

Signature of Employer: _____ Date _____

FAMILY INFORMATION:

Spouse's Name: _____ # of Children _____

SPOUSE VERIFICATION OF MEMBERSHIP: I realize that if my spouse _____ is accepted for membership in the LaGrange Fire Department, that he/she will be giving part of their time to public service. I further acknowledge that giving some form of public service is the duty of every citizen and hereby give my consent to this application with the understanding that the above applicant will be required to be away from their home and family occasionally for extended periods to perform Fire Department duties.

Spouse's signature: _____ Date _____

BACKGROUND INVESTIGATION:

Answer yes or no: Have you ever been convicted of:

DWI _____ Intoxication _____ Drug Abuse _____ Misdemeanor _____

Felony _____ Any other Conviction _____

VERIFICATION OF BACKGROUND INVESTIGATION:

A background investigation is conducted by the officers on all applicants applying for membership into the LaGrange Fire Department. It will be performed by the LaGrange Police Department. With this knowledge, I do hereby give my consent to a background investigation with the understanding that all information will be kept confidential.

Signature of Applicant _____ Date _____

VERIFICATION OF PHYSICAL EXAMINATION AND DRUG TEST:

If accepted by the LaGrange Fire Department all applicants will be required to take and pass a physical examination and drug test from the department's physician prior to active duty with the department. With this knowledge, I do hereby give my consent to a physical examination and drug test with the understanding that all information will be kept confidential.

Signature of applicant _____ Date _____

REFEREES:

Give three references other than members of the LaGrange Fire Department or Immediate family.

<u>Name:</u>	<u>Address:</u>	<u>Phone #</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

I realize that the LaGrange Fire Department is not a social organization or club, that I will become a public servant if my membership is approved and that I will be expected to conduct myself in an orderly and honorable manner at all times while on duty or off duty. I am willing and do realize that I will be expected to give freely of my time to attend all emergency calls, training sessions, meetings and any other activity I am called upon to perform for the LaGrange Fire Department. I will abide by the by-laws, Standard operating procedures and department policies. I will perform the duties given to me by my superiors as long as those orders are within reason. I confirm that all the information given is correct and true to the best of my knowledge. I also understand that knowingly falsifying this application is grounds for removal from the department.

Signature of Applicant _____ Date _____

Comments: _____
