

MANITOUWADGE FIRE DEPARTMENT

1 Mississauga Road Manitouwadge, ON P0T 2C0 (807) 826-3227

APPLICATION FOR MEMBERSHIP

The information collected in this application of membership is done under the authority of Section 29(2) of the Municipal Freedom of Information and Protection of Privacy Act, for the purpose of assessing eligibility for membership. Any inquiries concerning the collection and use of this information should be referred to the Municipal Clerk, 1 Mississauga Drive, Manitouwadge, Ontario, POT 2CO, (807) 826-3227

FULL NAME					
ADDRESS					
P.O. BO	x	POSTAL CODE			
HOME P	PHONE	WORK PHONE			
EMPLOYER					
SUPERVISOR					
CAN YOU BE CALLED AWAY FORM WORK FOR EMERGENCY DUTIES? YES NO					
ARE YOU REQUIRED TO WORK SHIFTS? THE NO					
DO YOU BELIEVE YOU ARE PHYSICALLY FIT TO PERFORM THE DUTIES OF A FIREFIGHTER?					
DRIVERS LICENCE	NUMBER	CLASS			
List previous experience in firefighting, first aid, or any special training you have received:					
EDUCATION (High School, Post Secondary)					

FULL NAME						
Company	PHONE NUMBER					
	1					
FULL NAME	PHONE NUMBER					
Company	FIIONE NOWIBEN					
Indicate your reasons for applying to join this						
department:						
If accepted, you will be placed on probation, during this period you will be expected to attend training and do home study on firefighting subjects. You will be tested from time to time, and if your tests indicate that you are unable or unwilling to perform as required by department policy, you will be dismissed. I have read and understand the requirements for membership in the Manitouwadge Fire Department.						
I certify the statements made are accurate, to the best of my knowledge.						
Applicant Signature	Date					
Applicant digitatore	Date					
I, authorize the Township of Manitouwa	ndge to contact the person or organization listed					
above for the purpose of obtaining reference information including informa	tion contained in my personal file and such person					
or organization is authorized to disclose such information. This authorization	on is in compliance with Subsection 32(b) of the					
Municipal Freedom of Information and Protection of Privacy Act.						
Applicant Signature	Date					

LIST TWO PERSONAL REFERENCES:

CERTIFICATE OF HEALTH

I have examined (Name o	Name of Applicant)			
I find this person to be in	(Circle appropriate item)	to perform the duties of a municipal firefighter.		
In my opinion, this person is (Circle app	to perform the o			
Physician Signature		Date		
NOTE: CORPORATION OF THE TOWNSHIP OF	- MANITOUWADGE, 1 MISSISSAU	JGA DRIVE, MANITOUWADGE, ON P0T 2C0		

STANDARD OPERATING RECURITMENT POLICY FOR THE MANITOUWADGE FIRE DEPARTMENT

Qualification Criteria:

Minimum age 18 years

Physically fit

Have successfully completed at least grade 12 or equivalent

Hold a valid Ontario Drivers Licence

Class "DZ" drivers licence preferred

Willing to abide by rules and policies outlined by the MFD

Criminal Background Check required

Prior to being considered for appointment to the force, applicants may be asked to perform practical exercise established by the Fire Chief involving any of all of the following:

- a) Ladder exercise
- b) Hose handling exercise
- c) Apparatus driving
- d) Other firefighting duties

Recruitment Procedure:

a) Advertising Process:

When needed and in order to attract the best possible candidates as future firefighters, the Fire Department will place an advertisement in the local newspaper.

b) Application Review:

The Chief with the intention of short-listing the application for interviews will undertake the application review process. References will be checked. All applications will be kept on file for one year. Unsuccessful applicants will be notified.

c) Interview Process:

The Chief and possibly the Deputy Chief will conduct the interview process. It will involve questions to be directed to the applicant. It will also provide any additional information the applicant may have regarding the Manitouwadge Fire Department.

d) Practical Exercise:

A practical exercise process may be required and shall be conducted by the Chief. This process will involve pre-arranged exercises covering any or all of the following:

- a. Ladders exercise
- b. Hose handling exercise
- c. Apparatus driving
- d. Other firefighting duties

e) Selection Process:

After reviewing all aspects of the applicant and a certificate of health being signed by a physician, the final selection will be made. The Chief's recommendation will then be forwarded to Council for appointment.