Morristown

Fire Department

Application Packet

**Application Deadline – September 1, 2012 – 12:00pm**

Morristown Fire Department

Mission Statement

Our Commitment is To Public Safety,

Achieved Through Developing, Promoting

And Maintaining a Comprehensive Network

Of Fire Prevention, Fire Suppression, And

Other Special Rescue Services.

Through Education, Training, and Communications

We Will Continue To Provide Quality Services.

**Equal Employment Opportunity and Data Practices Act**

We welcome you as an applicant for employment with the City of Morristown. It is the city’s policy to provide equal opportunity in employment. The City will not discriminate on the basis of race, age, religion, national origin, marital status, disability, sex, sexual orientation, status with regard to public assistance, or any other basis protected by law.

Some information contained and requested in this application is considered public data under the Minnesota Government Data Practices Act, including veteran status, relevant test scores, rank on eligibility list, job history, education, training, and work availability. As an applicant for employment, your name is considered private until you become a finalist for employment with the City. You are considered a finalist if and when you are selected for an interview by the hiring authority. Typically, the other information contained and requested in this application is considered private data under the Minnesota Government Data Practices Act, and will be used only in conjunction with your possible employment. Please furnish complete information so we may accurately and completely assess your qualifications. Your application will be evaluated in comparison to the requirements of the position for which you are applying. If the City of Morristown hires you, some of the information contained on this application form will become public data.

**Disqualification for Providing False Information**

I certify that all information I have provided in this application for employment is true and complete to the best of my knowledge. I agree and understand that any false statements or omission of information contained in this application or any supplemental materials I submit may disqualify me from further consideration for employment or result in immediate dismissal if discovered at a later date.

**Release for Reference Checks**

I authorize investigation of any information contained in the application for employment and/or supplemental materials I have submitted in consideration for employment, as may be needed to arrive at an employment decision. I authorize any or all education institutions and prior employers listed in the application for employment to provide information they may have concerning me as it may relate to consideration of my application for employment. I release those parties from any and all liability or clams for damage that may result from such.

**At-Will Employment**

If hired, I understand that employment with the City of Morristown is “at-will” and either the City of Morristown or I may terminate that employment at anytime, with or without notice.

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City Of Morristown

402 Division St S.

Morristown Mn. 55052

**Waiver for Physical Ability Test**

I acknowledge that there are risks in performing the physical ability tests that are part of the firefighter selection process. I agree to hold the City of Morristown and its employees and agents harmless. I waive the right to make any claims or lawsuits against the city or its employees or agents for any injuries or damages related to my participation in these tests. This waiver does not apply to any injuries that are the result of any willful, wanton, or intentional misconduct of the city or its employees or agents. My participation in these tests is voluntary and I understand the effect of this waiver on my legal rights.

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City Of Morristown

402 Division St S.

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**Criminal Background Check Consent Form**

Name: First\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Maiden, Alias or Former: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sex: M F Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver’s License #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_

Current Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you lived in Minnesota for at least the past 5 Years? Y N

Previous Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I authorize the Morristown Police Department, the Minnesota Bureau of Criminal Apprehension, and/or the Federal Bureau of Investigations Criminal Justice Information Department to disclose all criminal history record information to the City of Morristown.

* You have the right to be informed that the City of Morristown is requesting a Criminal Background Check to determine if you have been convicted of a crime.
* You have the right to obtain from the City of Morristown, the Minnesota Bureau of Criminal Apprehension, and/or the Federal Bureau of Investigations Criminal Justice Information Department, any records that forms the basis for this report obtained.
* You have the right to challenge the accuracy and completeness of information contained in the report or record.

The expiration of this authorization shall be one year from the date of my signature.

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Claim for Veteran’s Preference**

For purposes of offering a preference, a veteran is defined under Minn. Stat.§ 197.447 as being a citizen of the United States or a resident alien separated from active duty under honorable conditions from any branch of the U.S. Armed Forces:

* After having served on active duty for 181 consecutive days; OR
* By reason of disability incurred while serving on active duty (not active duty for training); OR
* Who has met the minimum active duty required as defined by 38 CFR § 3.12a; OR
* Who has active military service certified under U.S Public Law 95-202

Do you feel you qualify for Veteran’s Preference based on the eligibility requirement stated above? Y N

If yes, and to be considered, you will be required to furnish additional information that proves your claim when you submit the application.

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City Of Morristown

402 Division St S.

Morristown Mn. 55052

**Application**

Personal Information

Name: First\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you 18 years or older? Y N

Do you have a current valid Minnesota Drivers license? Y N

Have you ever been convicted felony crime? Y N

If yes, attach a separate sheet of explanation.

Educational Information

 Name and Location Years Attended

High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grad School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment Information (Current)

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Length of Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address/Phone # of Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description of Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Hour of Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment Information (Past)

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Length of Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address/Phone # of Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description of Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reason of Leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Use Back Side for More Information If Needed

 After your application packet has been returned, you will be contacted with the time of your oral interview and physical ability test. The date for this has been set for the morning of September 15, 2012. Please arrange your schedules early, as make ups will be difficult to organize.

 On that day you will start with your oral interview, conducted by the Morristown Fire Department Board of Directors. The interview will assess your oral communication skills, past and current related jobs skills, and your motivation and interest in joining the Morristown Fire Department. Your interview will make up 45% of the possible 100 points scored on that day.

 After the interview, you will be asked to participate in the physical ability test. This test will consist of 5 events, and will make up 55% of the possible 100 points scored on that day. The physical ability test will be conducted by members of the department, testing you against the physical demands of firefighting. These members will instruct you on each event, and tell you if that event is timed. Applicants are required to complete all activities to qualify. It is suggested that you wear soft rubber soled shoes and loose fitting pants while taking the test.

 After completion of the interview and ability test, each applicant’s respective points will be totaled. You must have a combined minimum score of 70 points to continue on in the selection process. Veteran’s Preference Points will be added at this time (per Minnesota Statute). Point totals will determine your position on the eligibility list. Open positions in the Department will be filled from this list. If selected, you will then be required to undergo a medical examination prior the final appointment to the Department. Based on the results of the examination, you will either qualify, or not meet the qualification for the position.

 If you qualify, you may begin your career with the Morristown Fire Department. You will be on a probationary period for two years. During these two years, you will be provided with and become familiar with the Constitution, Standard Operating Procedures, Standard Operating Guideline, and Personnel Policies of the Morristown Fire Department. You will also attend “Essentials of Firefighting 1001” (133 hours) and become a Minnesota First Responder (60 hours). While on probation you will be expected to respond to a minimum of 40% of all paged calls, and attend 80% of all monthly meetings and training sessions. During your Probation Period, you will be under review by the Morristown Fire Department Board of Directors, making sure you are showing continuous progress toward required schooling and certification required by the Department.

 A career in the Fire Service today offers an individual challenges, diversity and opportunity to help in the community. The Morristown Fire Department is a service that strives to provide a rewarding work environment and to assist you in your career development.

 The reality is that some people are not cut out for the fire service. They just can’t seem to make the commitment that is needed. But that’s okay, because it’s not for just anybody. It’s for those who can commit to core values such as Pride, Honor, and Integrity. It’s for those who can commit to a life of selflessness, to their brothers and sisters, and to the public. If this is you, welcome. I promise you it will be the best career choice you could have made.