

**Volunteer / Paid On-Call Firefighter Application Form**

Personal information on this form is collected under the authority of the

Municipal Freedom of Information & Protection of Privacy Act and will be used to

determine eligibility for employment as a Volunteer / Paid On-Call Firefighter. Questions about this collection of information should be directed to Human Resources at HR@adjtos.ca or 705-434-5055.

**Contact Information**

|  |  |
| --- | --- |
| Last Name: | First Name: |
| Home Address:  |
| Phone Number: | Email:  |

**Eligibility Requirements**

I am 18 years of age or older:

[ ] Yes / No [ ]

I have an Ontario Secondary School Diploma or academic equivalent:

[ ] Yes / No [ ]

I am legally eligible to work in Canada:

[ ] Yes / No [ ]

I can provide a clean Vulnerable Sector Check if hired:

[ ] Yes / No [ ]

I possess a valid Class G Driver’s Licence:

[ ] Yes / No [ ]

I can provide a clean Driver’s Abstract upon hire:

[ ] Yes / No [ ]

I am willing to obtain DZ Driver’s Licence within 2 years of hire date:

[ ] Yes / No [ ]

I reside within 8 KMs of Station 1 (6234 County Rd 13, Everett) or Station 2 (2821 Regional Rd 50, Loretto):

[ ] Yes / No [ ]

I possess valid Ontario Fire Administrative Inc. (OFAI) Stage 1 – Firefighter Aptitude & Character Test (FACT) and Stage 3 – Firefighter Physical Aptitude Job-Related Tests (FPAT):

[ ] Yes / No [ ]

I am available to respond to emergency calls:

Weekdays: [ ] Often [ ] Sometimes [ ] Never

Weeknights: [ ] Often [ ] Sometimes [ ] Never

Weekends: [ ] Often [ ] Sometimes [ ] Never

I acknowledge that I have read and understand the 2025 Recruitment Guide:

 [ ] Yes / No [ ]

**Preferred Qualifications**

I have previous firefighting experience with a fire department:

[ ] Yes / No [ ]

I have completed NFPA 1072 *Hazardous Materials Awareness & Operations* and NFPA 1001 *Firefighter Level 1 & 2* certification:

[ ] Yes / No [ ]

I possess a valid Standard First Aid CPR-C + AED certificate:

[ ] Yes / No [ ]

I possess a valid Class DZ Driver’s Licence or equivalent:

[ ] Yes / No [ ]

**Conditions of Acceptance**

I hereby declare that the information given is true and complete to my knowledge. I understand that any false statements, misrepresentation, deliberate omission or concealment of information may disqualify me from employment or cause my dismissal:

[ ] Agree

|  |  |
| --- | --- |
| Applicant Signature: | Date: |

*Township of Adjala-Tosorontio is an Equal Opportunity Employer, committed to diversity and inclusivity in employment for a barrier-free workplace. Accommodations are available for all parts of the recruitment, selection &/or assessment process. Applicants need to make their needs known in advance to Human Resources. We thank all those who apply, but only those selected for an interview will be contacted.*