



JOB DESCRIPTION

POSITION TITLE: Firefighter

DEPARTMENT: Fire & Emergency Services **DIVISION:** Suppression

REPORTS TO: Captains

SUPERVISES: DIRECTLY: # of F/T: None # of P/T or Seasonal: none
INDIRECTLY: # of F/T: None # of P/T or Seasonal: none

DATE REVISED September 2020 (Previous version date: x)

POSITION SUMMARY

Firefighters provide fire suppression, rescue and other related emergency services, and participate in programs designed for the prevention of fires and the saving of life and the protection of property and the environment. Firefighters are responsible for rapidly, efficiently and safely performing various duties under emergency conditions frequently involving considerable hazard. Firefighters participate in fire prevention, public education, training, communications, and other departmental programs, and perform various routine duties, including the maintenance of firefighting vehicles, equipment and fire service facilities. Firefighters are required to perform some administrative tasks including completing logs, forms, witness statements, station records, and other reports that may be required.

DUTIES and RESPONSIBILITIES

- Performs fire ground operations within an incident management system, so that lives are protected and property loss and damage to the environment is minimized.
- Performs rescue operations within an incident management system so that the victim is removed from an area of danger to an area of safety while preventing injury to the rescuer or victim;
- Performs hazardous materials and Chemical, Biological, Radiological and Nuclear/Explosive operations within an incident management system so that injury or loss of life is prevented, and environmental and property damage is minimized;
- Provides emergency patient care so that patients are assessed and stabilized, emergency care is initiated, and patients are transferred to emergency medical services for further care and transport;
- Performs firefighter safety practices so that safety of firefighters is maintained per applicable legislation, standards, and fire department operating guidelines;
- Operates and maintains fire apparatus such as pumpers, aerial devices, tankers, rescue trucks and support vehicles as required by the Ontario Highway Traffic Act and within the

vehicle's design parameters so that the apparatus is used safely and effectively and that preventable mechanical breakdowns are avoided;

- Maintains fire equipment to ensure a level of operational readiness so that equipment life is extended, safety is ensured, and equipment operates properly;
- Participates in fire safety inspections as coordinated by the Fire Chief and refers fire safety infractions/violations so that the premises meet an acceptable degree of life safety as specified by the authority having jurisdiction and property protection is achieved;
- Performs public education and public relations activities so that community public fire and life safety is promoted, and the public's understanding of fire service is enhanced;
- Performs communication duties so that required information is transmitted or received through the communications systems;
- Develops pre-incident plans as coordinated by the Deputy Fire Chief so that all pertinent information is available to fire suppression personnel for determining initial response and establishing incident management requirements;
- Performs administrative duties to ensure overall efficient operation of the organization is accordance with all relevant legislation and fire department operating guidelines;
- Assists in the maintenance of a positive team environment by working co-operatively with other employees, using the appropriate processes for handling problems, helping to motivate and encourage peers, contributing ideas, and assisting others where necessary;
- Adheres to municipal and departmental policies, procedures and programs. Contributes to development of goals and objectives regarding own work as requested by supervisor
- Promotes a high standard of customer service to the public as well as to all internal customers;
- Performs other related duties as required;

Works in compliance with the Corporate Health and Safety Policy and all other corporate policies, procedures and operational guidelines.

EDUCATION, CERTIFICATION, EXPERIENCE AND OTHER SKILLS

Education (degree/diploma/certifications)

Preferred: NFPA Certified Firefighter or grandfathered, First Aid CPR & Defibrillation, Class DZ Driver's License, Hazardous Materials Awareness.

Experience Related experience or skills are considered an asset (e.g. previous firefighting experience, relevant skilled trades, emergency medical experience).

Knowledge/Skill/Ability

- Valid Ontario Class “G” driver’s license with a driving record that indicates responsible and safe driving behaviour. (6 or more demerit points and/or license suspension is not acceptable);
- Ability to obtain Ontario Class “DZ” as required;
- Ability to wear/use self-contained breathing apparatus and personal protective equipment;
- Ability to obtain certification in First Aid, CPR, and Automatic External Defibrillator (AED);
- Effective verbal and written communication skills;
- Ability to exercise sound judgement, particularly during stressful circumstances;
- Ability to work as an effective team member;
- Problem solving skills;
- Knowledge of geography and characteristics of the response district; corporate and department policies, procedures and operating guidelines;
- Knowledge of fire behaviour, building construction, fire detection, alarm, and suppression systems; personnel accountability and incident management systems; principles, strategies, techniques, and resources used in fire suppression, rescue, hazardous materials, and related emergency operations;
- Knowledge of applicable federal & provincial legislation, regulations, codes, by-laws, standards, industry practices, and health and safety duties and responsibilities;

PHYSICAL DEMANDS and WORKING CONDITIONS

Please indicate “occasionally”, “regularly” or “frequently” under each dimension:

Physical Effort:

- Regularly Donning and using firefighter personal protective gear, respiratory protection, and other safety equipment as required;
- Performing emergency scene tasks under stressful conditions in hazardous environments, including climbing ladders or multiple flights of stairs, operating from heights, walking or crawling along narrow or uneven surfaces, carrying heavy tools and equipment, advancing water-filled hose lines, searching for and carrying/dragging victims to safety, working in hot, dark, tightly enclosed spaces, working in wet and/or extremely hot or cold environments for prolonged periods of time;
- Unpredictable emergency requirements for intense and sustained physical exertion without benefit of warm-up, scheduled rest periods, meals, access to medication, and/or hydration;
- Driving and/or operating fire department vehicles, equipment, and large fire apparatus as required;

Physical Environment:

- Regularly Intense mental concentration required to perform critical, time-sensitive complex problem-solving tasks at emergency scenes, aggravated by fatigue, noise and other distractions;
- Ability to tolerate exposure to intense emotional situations, including witnessing persons in distress, severe or multiple victim trauma or fatalities.

Stress: Frequently

After-hours meetings/ events: N/A

CONTACTS**Other Working Relationships:**

Who	Reason	How often <i>(Regularly, Occasionally or frequently)</i>
OPP	Emergency scene with multiple agencies involved	Regularly
SCPS	Emergency scene with multiple agencies involved	Regularly

EMPLOYEE ACKNOWLEDGEMENT

I have reviewed this job description and understand my duties and responsibilities.

Employee Name (Print) _____

Date _____

Employee Signature _____



Adjala-Tosorontio Fire Department
7855 Sideroad 30
Alliston, ON L9R 1V1
(705) 434-5055

Recruit Application

Please complete all documents and return to Debra Balfour, Fire Department Administrator, via email dbalfour@adjtos.ca or call Debra at 705-434-5055 ext. 229 to book an appointment to review your completed documents.

Name: _____ Date: _____

- Minimum 18 years of age
- Criminal and Vulnerable Sector Clearance Check cleared by Ontario Provincial Police. Authorization Form obtained with this Application to take to the Nottawasaga OPP Detachment Office.
- Two pieces of Original Photo Identification required when attending the OPP (Passport, Birth Certificate, Driver's Licence)
- Must possess a valid Ontario driver's licence. (Class D with Z endorsement to be obtained within 18 months of hire)
- Must provide a current driver abstract
- Must be medically fit to perform the duties of a Firefighter and provide a signed Medical Consent Form and the Respiratory User Screening form from an Ontario medical doctor that states you are physically fit for the position. In addition, you must sign a Physical Release Form. Medical Forms are included in this package.

On behalf of the Adjala-Tosorontio Fire Department, I thank you for your interest in participating in this program.

John Krayetski
Fire Chief



Adjala-Tosorontio Fire Department
7855 Sideroad 30
Alliston, ON L9R 1V1
(705) 434-5055

DATE: _____

APPLICANTS NAME: _____
First Last

ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

DATE OF BIRTH: (____/____/____)
Month Day Year

PHONE NUMBER: (____) _____ EMAIL ADDRESS: _____

NAME OF PRESENT EMPLOYERS COMPANY NAME: _____

EMPLOYERS ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

POSITION HELD: _____ PHONE NUMBER: (____) _____

SUPERVISORS NAME: _____

Is your employer aware of you joining the Fire Department and have you also advised them that due to Fire Department Emergencies, you may be late for work periodically?

Yes: _____ No: _____

Does your employer approve of you joining the Fire Department: Yes: _____ No: _____



Adjala-Tosorontio Fire Department
7855 Sideroad 30
Alliston, ON L9R 1V1
(705) 434-5055

EDUCATION

SECONDARY SCHOOL

NAME: _____
First Last

SCHOOL NAME: _____

ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

PHONE NUMBER: () _____

GRADE COMPLETED: _____ DIPLOMA: YES: _____ NO: _____

COLLEGE/UNIVERSITY/TRADE/TECHNICAL OR BUSINESS SCHOOL

SCHOOL NAME: _____

ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

PHONE NUMBER: () _____

LENGTH OF COURSE: _____ COMPLETED: YES: _____ NO: _____ DIPLOMA: YES: _____ NO: _____

CERTIFICATES (Attached all certificates to application)

C.P.R.: YES: _____ NO: _____

FIRST AID: YES: _____ NO: _____

Other: _____

I _____ declare all the foregoing information to be true to the best of my knowledge. I understand that any false statements may disqualify me from being hired or cause my release.

Applicants Signature: _____ Date Signed: _____



Adjala-Tosorontio Fire Department
7855 Sideroad 30
Alliston, ON L9R 1V1
(705) 434-5055

MEDICAL HISTORY

DATE: _____

APPLICANT'S NAME: _____
First *Last*

ALLERGIES OR CONDITIONS: _____

MEDICATION REQUIRED: _____

BLOOD TYPE: _____

IMMUNIZATIONS AND YEARS RECEIVED: _____

DATE UPDATES REQUIRED: _____

DOCTORS NAME: _____ PHONE NUMBER: () _____

DOCTORS ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

HEALTH CARD NUMBER: _____

EMERGENCY CONTACT: #1 NAME: _____

PHONE NUMBER: _____

RELATIONSHIP: _____

EMERGENCY CONTACT: #2 NAME: _____

PHONE NUMBER: _____

RELATIONSHIP: _____



Fire Department Consent and Release Form Fire Fighter Physical Release Form

I, THE UNDERSIGNED, DO HEREBY ACKNOWLEDGE:

- My consent to perform a fire fighter physical aptitude test consisting of:
 1. a ladder climb test
 2. a confined space test
 3. a hose carry/stair climb
 4. a hose raise
 5. a mannequin drag
 6. a simulated forcible entry
 7. a run/walk
 8. a hose drag
- My obligation to immediately inform the appraiser of any pain, discomfort, fatigue, or any other symptoms that I may suffer during and immediately following the testing.
- My understanding that I may stop the testing if I so desire and that the testing may be terminated by the appraiser upon observation of any symptoms of distress or abnormal fatigue.
- That I have no knowledge of any physical health problem that may be prohibit my participation in the testing process.
- That I hereby release the Adjala-Tosorontio Fire Department, its agents, officers and employees from any liability with respect to any damage or injury (including death) that I may suffer during the administration of the fire fighter physical aptitude test except where the damage or injury is caused by the negligence of the Adjala-Tosorontio Fire Department or its agents, officers and employees acting within the scope of their duties.
- That I am not performing these tests as part of my duties as a part-time fire fighter with the Adjala-Tosorontio Fire Department and therefore I am not entitled to benefits under the Workers Compensation Act.

Name: _____

Signature: _____ Date: _____

Witness: _____ Date: _____



From the Office of the Fire Chief
7855 30th Sideroad
Alliston, ON
L9R 1V1
(705) 434-5055 Fax: (705) 434-5051

To: Nottawasaga OPP

Detachment Attention: Records

This letter is to request a Criminal Record Check including a Vulnerable Sector

Screening be completed for _____, D.O.B.: _____

who will be (Volunteering/Employment) as a _____

with our agency/group.

Should you have any questions or require anything further please do not
hesitate to contact the undersigned.

CLARIFY REASON FOR VSS REQUEST: To obtain employment as a
volunteer Fire Fighter with the Township of Adjala-Tosorontio Fire
Department

Authorized Signature
Fire Chief (or designate)

Applicant's Signature

Date: _____

Date: _____



PHYSICIAN CONSENT FORMS

The forms shall be completed by a medical physician before commencing the physical testing portion of the recruitment procedure. Failure in having a medical doctor's consent to proceed with testing will result in disqualification from the competition. The forms will also serve as medical clearance to perform the regular duties of a firefighter including use of a SCBA and N-95 mask under the department's respiratory protection program. All forms are included in the package.

JOB RELATED PHYSICAL PERFORMANCE TEST REQUIREMENTS

The following test descriptions below are for some regular duties that firefighters may be called on to do in a normal shift:

Non-timed events (3): Each non-timed event shall be successfully completed to advance.

Equipment worn: All events will be performed while wearing all personal protective clothing (PPC), and with self contained breathing apparatus (SCBA). The claustrophobia test will be in a blacked out environment simulating a zero visibility search. This test will be completed in full SCBA and on air.

Indoor testing (one cylinder per candidate):

1. Claustrophobia Test : The candidate shall search an area, retrieve and identify objects. Kneeling, crawling, and maneuvering through objects/obstructions is required during this task simulating a high heat zero visibility structural search & rescue operation.
2. Hoist & Lower Equipment: The candidate shall hoist and lower, hand over hand under full control (no slip or drop), a dry hose roll, weighing approximately 18Kg – 22Kg (40-50 lbs) up and down a 10.5 meter (35-foot tower) continually without stopping.
3. Lift & Carry a Hose Load: The candidate shall successfully lift and shoulder a 45 meter (150 foot) bundle of 45 mm hose (high rise pack), weighing approximately 18Kg – 22Kg (40-50 lbs) the distance of 45 meters (150 feet) including climbing two flights of stairs twice (x2) under control without dropping the hose.

Outdoor testing (one cylinder per candidate):

4. Advance a Hose Line: The candidate shall advance a 45 mm charged hose line continually under full control without stopping or falling, approximately 23 meters (75 feet) using pulling exertion.
5. Climbing an Extension Ladder; Uncouple & Couple a Hose Connection; Descend the Ladder to ground: The candidate shall climb a 7 metre (24-foot) ladder dis-mount the ladder onto a balcony; uncouple and couple a 65 mm hose then re-mount and descend the ladder to the ground (on fall arrest system).
6. Forcible Entry Drill: Using an 8-10 lb sledgehammer the candidate will move a weighted tire 12" on a waist height horizontal surface.

EACH TASK WILL BE PROPERLY EXPLAINED AND DEMONSTRATED PRIOR TO COMMENCEMENT TO ENSURE YOUR SAFETY

Also attached is a copy of the job description for review, and also the pre-screening Respiratory Protection Program forms for SCBA & N-95 fit testing for completion by your Physician. This form only needs to be authorized by your physician if you indicated "Yes" in Section 2: Health Conditions.

Applicant's Release

I hereby authorize my physician to complete this job related physical fitness assessment.

Applicant's Signature

Physician Consent

I have reviewed the realistic job preview assessment as well as the job description for a volunteer firefighter and deem _____ ABLE TO partake in such
(Print Applicant's Name)
activities with no restrictions.

Physician or Nurse Practitioner's Name (Please Print)

Physician or Nurse Practitioner's Signature

Date

Physician Refusal

I have reviewed the physical fitness assessment as well as the job description for a volunteer firefighter and DO NOT deem this applicant capable of partaking in the foresaid activities without risking injury to him/herself.

Physician or Nurse Practitioner's Name (Please Print)

Physician's Signature

Date

Adjala-Tosorontio Fire Department - Respiratory User Screening Form

Respirator User Information		SUPERVISOR / MANAGER
Employee Name	Telephone	Fax
Job Title/Occupation Firefighter	Department Adjala-Tosorontio Fire Department	Employee #

Employer Information		SUPERVISOR / MANAGER
Employer Name Corporation of the Township of Adjala-Tosorontio		Supervisor/Manager Name
Address (number, street, apt., suite, unit) 7855 Sideroad 30		Department Township of Adjala-Tosorontio Fire Department
City/Town Alliston	Province ON	Postal Code L9R 1V1
Telephone 705-434-5055 ext. 229		Fax 705-434-5051

Part 1: Work Conditions	SUPERVISOR / MANAGER																														
Activities/tasks requiring use of respirator: Firefighting, Rescue, Hazardous environment responses, some medical response																															
<table style="width: 100%;"> <tr> <td>Frequency of respirator use:</td> <td><input checked="" type="checkbox"/> Daily</td> <td><input checked="" type="checkbox"/> Weekly</td> <td><input type="checkbox"/> Monthly</td> <td><input type="checkbox"/> Yearly</td> <td><input type="checkbox"/> Uncertain</td> </tr> <tr> <td>Exertion level during use:</td> <td><input checked="" type="checkbox"/> Light</td> <td><input checked="" type="checkbox"/> Moderate</td> <td><input checked="" type="checkbox"/> Heavy</td> <td colspan="2"></td> </tr> <tr> <td>Duration of respirator use per shift:</td> <td><input checked="" type="checkbox"/> < 15 min</td> <td><input checked="" type="checkbox"/> > 15 min</td> <td><input checked="" type="checkbox"/> > 2 hrs</td> <td><input checked="" type="checkbox"/> Variable</td> <td><input type="checkbox"/> Unknown</td> </tr> <tr> <td>Temperature during use:</td> <td><input checked="" type="checkbox"/> < 0 °C</td> <td><input checked="" type="checkbox"/> > 0 °C</td> <td><input checked="" type="checkbox"/> < 25 °C</td> <td><input checked="" type="checkbox"/> > 25 °C</td> <td></td> </tr> <tr> <td>Atmospheric pressure during use:</td> <td><input checked="" type="checkbox"/> Reduced</td> <td><input checked="" type="checkbox"/> Normal</td> <td><input checked="" type="checkbox"/> Increased</td> <td colspan="2"></td> </tr> </table>		Frequency of respirator use:	<input checked="" type="checkbox"/> Daily	<input checked="" type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Yearly	<input type="checkbox"/> Uncertain	Exertion level during use:	<input checked="" type="checkbox"/> Light	<input checked="" type="checkbox"/> Moderate	<input checked="" type="checkbox"/> Heavy			Duration of respirator use per shift:	<input checked="" type="checkbox"/> < 15 min	<input checked="" type="checkbox"/> > 15 min	<input checked="" type="checkbox"/> > 2 hrs	<input checked="" type="checkbox"/> Variable	<input type="checkbox"/> Unknown	Temperature during use:	<input checked="" type="checkbox"/> < 0 °C	<input checked="" type="checkbox"/> > 0 °C	<input checked="" type="checkbox"/> < 25 °C	<input checked="" type="checkbox"/> > 25 °C		Atmospheric pressure during use:	<input checked="" type="checkbox"/> Reduced	<input checked="" type="checkbox"/> Normal	<input checked="" type="checkbox"/> Increased		
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Uncontrolled Environments (check all that apply): <input checked="" type="checkbox"/> Emergency Escape <input checked="" type="checkbox"/> Fire Fighting <input checked="" type="checkbox"/> Rescue Operations <input checked="" type="checkbox"/> Hazardous Materials (Emergency) <input checked="" type="checkbox"/> IDLH Atmospheres <input checked="" type="checkbox"/> Oxygen Deficient Atmospheres <input checked="" type="checkbox"/> Confined Spaces <input checked="" type="checkbox"/> Other: Hazardous environment response																															
Identify additional types of personal protective equipment required: Bunker Gear, SCBA Harness set, other Personal Protective Clothing (some NTFR members may wear the following PPC garments (Level A,B,C, or D protection))																															
Average weight of tools/equipment carrier during respirator use: <input checked="" type="checkbox"/> Light: < 1.4 Kg (3 lbs) <input checked="" type="checkbox"/> Moderate: < 15.9 Kg (25 lbs) <input checked="" type="checkbox"/> Heavy: > 22.7 Kg (50 lbs)																															
Types of respirators used (check all that apply): <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Tight-fitting (e.g. mask)</td> <td><input type="checkbox"/> Air-purifying (powered)</td> <td><input type="checkbox"/> Supplied-air (continuous flow)</td> <td><input checked="" type="checkbox"/> SCBA</td> </tr> <tr> <td><input type="checkbox"/> Loose-fitting (e.g. hood)</td> <td><input checked="" type="checkbox"/> Air-purifying (non-powered)</td> <td><input type="checkbox"/> Supplied-air (pressure-demand)</td> <td><input type="checkbox"/> Supplied-air suit</td> </tr> <tr> <td><input checked="" type="checkbox"/> Half Facepiece</td> <td></td> <td><input checked="" type="checkbox"/> Combination supplied-air (pressure-demand) with escape</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Full Facepiece</td> <td></td> <td><input type="checkbox"/> Combination supplied-air with air-purifying elements</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Filtering Facepiece (disposable)</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="4"><input type="checkbox"/> Other:</td> </tr> </table>		<input type="checkbox"/> Tight-fitting (e.g. mask)	<input type="checkbox"/> Air-purifying (powered)	<input type="checkbox"/> Supplied-air (continuous flow)	<input checked="" type="checkbox"/> SCBA	<input type="checkbox"/> Loose-fitting (e.g. hood)	<input checked="" type="checkbox"/> Air-purifying (non-powered)	<input type="checkbox"/> Supplied-air (pressure-demand)	<input type="checkbox"/> Supplied-air suit	<input checked="" type="checkbox"/> Half Facepiece		<input checked="" type="checkbox"/> Combination supplied-air (pressure-demand) with escape		<input checked="" type="checkbox"/> Full Facepiece		<input type="checkbox"/> Combination supplied-air with air-purifying elements		<input checked="" type="checkbox"/> Filtering Facepiece (disposable)				<input type="checkbox"/> Other:									
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<input type="checkbox"/> Other:																															

Part 2: Health Conditions	WORKER
Do you have or have you experienced any of the following, or any other condition that may affect respirator use? (check yes or no only, <u>do not specify</u>) <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> • Shortness of breath • Lung disease • Hypertension • Neuromuscular disease • Temperature susceptibility • Panic attacks • Vision impairment • Back or neck problems 	<ul style="list-style-type: none"> • Breathing difficulties • Chest pain on exertion • Cardiovascular disease • Fainting spells • Chronic bronchitis • Cardiac Problems • Thyroid problems • Dizziness or nausea
<ul style="list-style-type: none"> • Asthma • Emphysema • Allergies • Diabetes • Seizures • Dentures • Pacemaker • Hearing impairment 	<ul style="list-style-type: none"> • Vision impairment • Colour blindness • Pneumonia • Tuberculosis • Silicosis • Pneumothorax • Asbestosis • Broken ribs
<ul style="list-style-type: none"> • Reduced sense of taste • Reduced sense of smell • Other chest injuries or surgeries • Facial features/skin conditions • Claustrophobia or fear of heights • Prescription medication (existing condition) • Other condition affecting respirator use 	
Have you had previous difficulty while using a respirator? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
Do you have any concerns about your future ability to use a respirator safely? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<i>I understand the information provided on this form will be used to determine my ability to participate in respiratory fit testing and to identify if I will be put at risk (physiologically or psychologically) when wearing respiratory protection. I understand that a Health Care Professional may contact me if further clarification is required regarding the information provided below or for a referral to a Physician.</i>	
Worker Name (Print)	<div style="display: flex; justify-content: space-between;"> <div>Worker Signature</div> <div style="text-align: right;"> dd mm yy </div> </div>

Part 3: Medical Assessment	PHYSICIAN
Recommendation: <input type="checkbox"/> NO restrictions required <input type="checkbox"/> Some specific restrictions apply (Describe below) <input type="checkbox"/> Respirator use is NOT permitted 	
Restrictions: <div style="height: 100px; border: 1px solid black; margin-top: 5px;"></div>	
Physician's Name (Print)	<div style="display: flex; justify-content: space-between;"> <div>Physician's Title</div> <div>Telephone</div> <div>Fax</div> </div>
Physician's Employer Name	<div style="display: flex; justify-content: space-between;"> <div>Physician's Signature</div> <div style="text-align: right;"> dd mm yy </div> </div>

The Corporation of the Township of Adjala-Tosorontio



Volunteer Firefighter Orientation Guide

This Orientation guide is intended to explain the steps of the process and the expectations of our candidates.

SELECTION PROCESS The selection process will consist of the following components:

Stage 1: Application Review

Stage 2: Interview and Aptitude Test

Stage 3: Physician Consent & Realistic Job Preview forms (fit testing forms)

Stage 4: Realistic Job Previews

Stage 5: Selection & Acceptance

Stage 6: Probationary Period (12 months)

Stage 1: Application Review

The Corporation of the Township of Adjala-Tosorontio is an equal opportunity employer and abides by the Ontario Human Rights Code and other applicable laws of the Province of Ontario.

Applications will be reviewed with the following priorities:

Mandatory Requirements

1. 18 years of age or older
2. Proximity of location to Fire Station
3. Available to meet and/or exceed department targets for training & responses
4. Legally entitled to work in Canada
5. Driver's Licence in good standing
6. No criminal or summary convictions that would adversely affect public trust.
7. Good physical and mental health.

***Note** – Once hired, the Town reserves the right to review participation, as a volunteer Fire Fighter should the place of employment or residence change or availability to respond to calls and attend training diminishes.

Preferred Qualifications

1. D Licence with Z air brake endorsement (a requirement to complete probationary period)
2. Previous firefighting experience
3. Education related to firefighting
4. Construction or building experience
5. Experience operating heavy equipment or driving commercial vehicles
6. Ability to respond during business hours (day time availability is an asset)

Stage 2: Interview, Aptitude Test (PPE Sizing Survey)

If selected for an interview a member of the Human Resources Department will contact you. A panel consisting of the Fire Chief or designate, Human Resources personnel as well as any other delegates requested by the Fire Chief, will interview you.

At the end of the interview process you will be provided with a Physician Consent Form and Realistic Job Preview Consent Waiver & Release Form (including fit test medical pre-screening forms). If successful at the Interview stage a member of the Human Resources Department will contact you to advise and request completion of the aforementioned forms prior to attending the realistic job preview testing stage. A time and date for the fitness testing stage will be given at that time.

Stage 3: Medical Examination Consent & Review of Realistic Job Previews Waiver & Release

You are required to take the Medical Examination Consent form also the fit testing medical pre-screening forms along with the Volunteer Firefighter job description to have it completed by a medical physician. You are also required to review the Realistic Job Previews Waiver and Release form. We encourage you to seek legal consultation if anything on the form is unclear prior to signing. Bring the completed forms to the Realistic Job Preview Stage on the assigned date. The expense of obtaining medical consent will be at the applicant's expense.

Refusal to acknowledge and sign any of the documents will preclude further participation in the Volunteer Firefighter competition. You will also be precluded if your physician does not consent to your participation. All pre-requisite training materials also require complete review prior to the Realistic Job Performance stage.

Stage 4: Realistic Job Preview

The tasks you are requested to perform in the realistic job preview are designed to reflect job related tasks required in the performance of firefighting duties. The purpose of the analysis is two-fold; to provide you with a realistic idea of some incident tasks you will be expected to perform and provide the fire department with a base of skills and your abilities.

Tasks Include:

- Claustrophobia Test- simulated search & rescue
- Hoist & Lower Equipment
- Advance a Charged Hose Line
- Ladder Climb; Uncouple & Couple a Hose Connection
- Lift & Carry a Hose Load
- Forcible Entry Drill

Stage 5: Selection & Acceptance

The interview panel will conduct a review of results of the realistic job preview stage and interview and aptitude test answers. Successful candidates will be chosen based on knowledge, skills and abilities demonstrated throughout the recruitment process.

If candidates complete the interview and realistic job previews at an acceptable level, but are not chosen due to a lack of positions, they will be asked if they would like to be put on a waiting list. When positions become available the fire department will contact the previously tested applicant(s) to determine if they would like to become a member of the fire department at that time. Contact order on this list will again be based on knowledge, skills and abilities demonstrated in the initial recruitment process. Updated medical clearance may need to be obtained if this recruitment takes place more than 3-months after the initial interview and testing date.

Stage 6: Probationary Period

Successful candidates will be required to attend mandatory training weekends. They will also be required to successfully complete a 12 month probationary period. This period will be used to train and assess whether you are able to meet the required Fire Service Standards. If the Fire Chief determines that after the foresaid period you are unable to fulfill the minimum said standards or you did not obtain a DZ licence, you may be terminated or your probation period may be extended.

Your ongoing dedication and participation in both training and incident response will be required. You are expected to successfully complete the training curriculum and any other programming as required through to certification. Ongoing re-certification and refreshers are also required after successful completion of the probationary period and throughout your career.

The Township of Adjala-Tosorontio would like to acknowledge the dedication and effort required in the pursuit of becoming a firefighter and your desire in the protection of our Community