

Grantsburg Fire Department
Probationary Firefighter Application

Military Service

Have you ever served in the Military? [] Yes* [] No Period of Service: _____ to _____

Branch of Service: _____ MOS: _____

Rank at Discharge: _____ Honorable Discharge? [] Yes [] No

*You may be asked to provide a completed and signed DD214 form

Fire Department / Training

Have you ever served on another Fire Department? [] Yes [] No

Fire Department Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Period of Service: _____ to _____

Background Check Use additional sheets if necessary.

Your probationary appointment to the Department is dependent upon your ability to successfully pass a criminal background check. A conviction will not necessarily bar you from consideration.

Have you had any traffic violations within the past five years? [] Yes [] No **If yes, explain:**

Have you ever been convicted of an ordinance violation? [] Yes [] No **If yes, explain:** _____

Have you ever been convicted of a crime? [] Yes [] No **If yes, explain:** _____

Have you ever been involved in a civil lawsuit? [] Yes [] No **If yes, explain:** _____

Personal References Please list two (2) personal references. They should not be former employers (or supervisors used as employment contacts), not more than one (1) family member and not more than one (1) current member of the Grantsburg Volunteer Fire Department.

Name: _____

Address: _____ City: _____ State: _____ ZIP: _____

Home Phone: _____ Cell Phone: _____ Best time to call: _____

How acquainted: _____ How long have you known the acquaintance? _____

Name: _____

Address: _____ City: _____ State: _____ ZIP: _____

Home Phone: _____ Cell Phone: _____ Best time to call: _____

How acquainted: _____ How long have you known the acquaintance? _____

Explain why you wish to become a member of the Grantsburg Fire Department: _____

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PLEASE READ CAREFULLY

Minimum Probationary Membership Requirements

- Must be at least eighteen (18) years of age.
- Must be of good moral character and reputation.
- Must be a United States Citizen or proof of naturalization.
- Must provide proof of identity and employment eligibility.
- Must reside within the Grantsburg Fire District.
- Must be a high school graduate or possess a high school equivalency diploma (GED).
- Must have an honorable discharge if served in the military.
- Must possess a valid driver's license and have a good driving record.
- Must obtain and maintain automobile insurance as required by the State of Wisconsin.
- Must not be addicted to any barbiturate, narcotic, or the excessive use of alcohol.

Physical Examination

Your appointment as a probationary member to the Department is dependent on your ability to pass a physical examination performed by a physician chosen by the Department. The examination may include a drug screening test and a physical stress test. If you have any physical, mental, or health related issues that may limit your ability to perform all firefighting functions, please indicate that on a separate sheet attached to this application. The listing of any such limitations will not disqualify you from becoming a member of the Department, but may cause limitations on your response status if you are appointed.

Probationary Period

If selected as a probationary member of the Department, you will serve a minimum of a 12-month probationary period starting from the date of your probationary appointment. During your probationary period you will need to successfully complete the following training which includes: State of Wisconsin Entry Level / Firefighter I, Certified Firefighter I, Wisconsin DNR Basic Wildland Firefighting, and a Basic First Aid / CPR / AED. During your probationary period you are also required attend all meetings during the first six (6) months of your probationary period and half (50%) of the meetings during the remaining portion of your probationary period, unless excused by a Department officer prior to the meeting. You will also abide by all laws of the State of Wisconsin, all rules, regulations, and orders of the Grantsburg Fire Department. Failure to complete all training, attend all meetings as required, or not comply with Department rules, regulations, and orders may be cause for extending your probationary period and or termination from the Department.

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PLEASE READ CAREFULLY BEFORE AFFIXING YOUR SIGNATURE

I hereby affirm as part of the application process that I am willing to undergo a physical examination by a physician selected by and paid for by the Department.

I hereby affirm that I have read and understand the basic requirements and policies of the Department's Probationary Period.

I authorize the Grantsburg Fire Department to conduct any investigation they deem necessary with any local, county, state, national police agency, or any other agency for the motor vehicle, criminal, and general background check.

I hereby affirm that the information provided on this application are to the best of my knowledge accurate and true. I agree that misleading or falsified information, or omissions, may disqualify me from further consideration for becoming a probationary member of the Grantsburg Fire Department and may be considered justification for dismissal when discovered at such a later date.

Signature: _____ Date: _____

The Grantsburg Fire Department is an equal opportunity employer. It is our policy to comply fully with federal and state fair employment laws prohibiting discrimination because of age, race, creed, color, handicap, sex, national origin, ancestry, marital status, sexual orientation or arrest or conviction record (WI ss 11.31, etseq.) and information requested on this application will not used for any purpose prohibited by law.

FOR FIRE DEPARTMENT USE ONLY	
Probationary Hiring Process	
Date Application Received: _____	Received By: _____
Date Review By Fire Chief: _____	Meets Minimum Requirements: [] Yes [] No
Date Background Check Completed: _____	Background Check Concerns : [] Yes [] No
Date Applicant Interviewed: _____	Officer Approved: [] Yes [] No
Date of Physical Exam: _____	Passed Physical Exam: [] Yes [] No
Date of Hire: _____	
6 Month Probationary Review	
Date of Review: _____	
Issues: _____	
Officer Approval: [] Yes [] No	
12 Month Probationary Review	
Date of Review: _____	
Issues: _____	
Officer Approval: [] Yes [] No	Date of Officer Approval: _____
Date of Department Approval: _____	