

OKALOOSA ISLAND FIRE DISTRICT

104 Santa Rosa Boulevard Fort Walton Beach, FL 32548 (850) 244-5373 x201 Fax: (850) 244-3911 www.okaloosaislandfire.com

APPLICATION PACKAGE INSTRUCTIONS

All applicants will be reviewed for the following items:

You must meet the requirements of Florida Statute 633.34, Firefighter qualification for employment.

You must have a high school diploma or G.E.D

You must have a clean criminal and driving record. (Prior arrests or convictions will be reviewed against the Florida Statutes to determine eligibility).

Your driving record will be reviewed as you must be qualified to operate Okaloosa Island Fire District vehicles.

You must be in good physical health, tobacco-free for twelve (12) months prior to applying and be able to perform the tasks associated with the duties of a Firefighter.

PART 1 Application

1. Complete the application in full.

- a. Attach copies of any licensures or certifications that you have. A resume may also be attached.
- b. Attach a copy of your high school diploma (or G.E.D) and any college degree(s) to the application.
- c. Attach a copy of your driver's license (front only) to the application.
- d. Attach a copy of your immunization record to the application. (Please identify if you do not have one.)
- e. Additionally, obtain a copy of your driving record from the clerk of court and attach to the application.
 - i. If you have lived in Florida for less than five (5) years, you will also need a copy of your driving record from your previous State of residence.
- 2. Return the completed package to the Administrative Office of the Okaloosa Island Fire District. (We are not responsible for lost or missing packages that are not hand delivered to the Administrative Office).

Your application package will be reviewed. If it meets with the Okaloosa Island Fire District current guidelines then you will move on to Part 2. If all information required is not provided the application will not be accepted.

PART 2 Written Test, Physical Agility Test and Swim Test (These will be scheduled at a later date.)

- 1. You will be notified that you are scheduled for a written test of which you must achieve a 70% or greater to move on in the application process.
- 2. A physical agility and swim test will follow the written examination.
 - a. All testing consists of information, tasks or simulations of tasks that Okaloosa Island Firefighters normally perform.
 - b. The specific guidelines will be provided to you prior to testing.

PART 3 Personal Interview

1. You will be notified of your scheduled time for this interview.



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APPLICATION

Date of Application:	Position Applying For:

PERSONAL INFORMATION							
Name							
Driver's License #	First, Middle			State	Exp	Suffix, Jr., III, etc. Class	
Address							
Phone () -	Street	() -	City	() -	State	Zip	
Cell Phone numbers and e-mail addresses are not for pu	iblic release as they are	Work	formation for the nurnose o	Other	Are vou at	Email least 18 years of age? Yes No	
CURRENT EMPLOYMENT	abile release as they are	asca only as contact in	iorniation for the purpose t	, ,	iic you at	icust to yours of ago: 103 No	
Employer Name			Phone			Supervisor	
Date Employed		Position			Date	Left Employment	
Reason for leaving					<u> </u>		
If less than three years list previous employer			1				
Employer Name			Phone			Supervisor	
Date Employed		Position			Date	e Left Employment	
Reason for leaving							
BACKGROUND INFORMAT	ION						
Have you ever been arrested? Yes No Have you ever been convicted of a crime? Yes No If answered yes to either question list the date and nature of the offense (Use additional paper if							
necessary)							
CURRENT INFORMATION							
Are you currently certified as a F	lorida Firefigl	hter II?			Yes	No	
Date of Certification			Certificatio	n Number			
Are you currently certified?	Florida E	MT	Yes	No			
Date of Certification			Certificati	on Number			
Are you currently certified?	Florida Paramed	lic	Yes	No			
Date of Certification			Certification	on Number			
Do you hold any other certifications? (i.e. HAZMAT, ARFF, etc.) Yes No							
Are you currently certified? USLA Yes No							
List other certification on comments section p	page 2. All copies of c	ertifications must be p	provided with application	on.			

PREVIOUS FI	RE EXPERIENCE (Volunteer or Po	aid)			
Department Nar				Chi	ef
Contact Number	r () -		Email		
Department Nar	ef				
Contact Number	r () -		Email		
Department Nar	<u> </u>			Chi	ef
Contact Number Email					
EDUCATION	()				
		City & State Date		te	Degree Earned
	Name	·	Grad	uated	
High School					Diploma or G.E.D. (circle)
Vocational					
College					
Other					
EMERGENCY	CONTACT				
Name					
	Last, First, MI		Relationsh	ip to you	
Address					
	Street	City	State		Zip
Phone			0.11		-
	Home	Work	Cell		
	\mathbf{S} (List three not related to you; at least on	e current coworker.)			
Name					
	Last, First, MI		Relationsh	ip to you	
Address	011	0.1	01-1-		7.
DI.	Street	City	State		Zip
Phone	Home	Work	Cell		Email
Name	Tionic	VVOIN	OGII		Liliali
TVallic	Last, First, MI		Relationsh	ip to you	
Address					
	Street	City	State		Zip
Phone	Home	Work	Cell		Email
Name	none	VVOIN	OGII		Liliaii
TVallic	Last, First, MI		Relationsh	ip to you	
Address					
	Street	City	State		Zip
Phone			0.11		-
COMPANIE	Home	Work	Cell		Email
COMMENTS					

I certify that all answers given by me are true, accurate a misrepresentation or omission of fact on this application cause for denial of employment or immediate termination discovered.	(or any other accompanying documents) will be
Signature	Date