# PROTECTION ISLAND PAID ON-CALL APPLICATION FORM



#### **INSTRUCTIONS:**

- 1. Please fully complete all sections; information provided will be used to determine eligibility.
- 2. Submit the completed form to:

CONTACT INFORMATION

Nanaimo Fire Department Command and Business Centre 666 Fitzwilliam Street OR

Email to: fireinfo@nanaimo.ca

CONTACT INFORMATION						
Last Name:	First Name:	First Name:				
Street Address:						
	T =					
City:	Province:	Postal Code:				
Hama Dhana	Call Dhana					
Home Phone:	Cell Phone:					
Email:						
Email.						
Date available to start:						

#### REFERENCES

Please provide at least 2 references for individuals you have reported to directly.

Name of Employer/Organization	Reference Person (name and position)	Contact Information (phone and email)		

## Are you currently, or were you previously, employed by the City of Nanaimo? Yes No Please provide the following details regarding your work experience. Start with your present or most recent employer and work backwards. Please attach a copy of your resume if you wish to provide more detail. Present or Last Employer: Address/Phone: Type of Business: Your Job Title: Period Employed (From and To): Name and Title of Immediate Supervisor: Reason for Leaving: Briefly describe job duties and responsibilities: Address/Phone: Employer: Type of Business: Your Job Title: Period Employed (From and To): Name and Title of Immediate Supervisor: Reason for Leaving: Briefly describe job duties and responsibilities: Employer: Address/Phone: Type of Business: Your Job Title: Period Employed (From and To) Name and Title of Immediate Supervisor: Reason for Leaving: Briefly describe job duties and responsibilities:

**EMPLOYMENT HISTORY** 

### **CONFIRMATION OF QUALIFICATIONS**

Please list your qualifications and experience using the table below, and attach any appropriate documentation.

Minimum Required Qualifications	Yes or No	Date Completed (if applicable)	Expiry Date (if applicable)	Additional Comments (if needed)	
Resident of Protection Island and legally entitled to work in Canada					
Completion of Grade 12 or equivalent					
Class 5 BC Driver's License (Class 7 may be acceptable)					
Able to provide driver's abstract showing responsible and safe driving behavior with less than 6 points in the past 3 years		Do not provide a driver's abstract at this time			
Able to pass a medical assessment based on NFPA Standards 1582		Do not provide medical information at this time			
Free of any criminal or summary conviction offences related to the role of a Paid-On-Call Fire Fighter and will pass a criminal record check for such		Do not provide a criminal record check at this time			
Other Skills / Experience					
Previous Fire Fighting experience and training					
NFPA 1001 (Firefighter 1 & 2 Certification)					
CPR for Health Care Providers (HCP)					
First Responder Level/Emergency Medical Responder/OFA Level 3 or equivalent					
Volunteer and community experience					
University / College degree or diploma					
Other experience and/or training (i.e. construction, mechanical trades, machinery operation, search and rescue, etc.)					
APPLICATION DECLARATION					
By signing below, I verify that:					
All information provided in this application is true and correct. Any false statements or misinformation will disqualify my application.					
I consent to the collection, use and disclosure of the information provided in this application for the purpose of reviewing and assessing my application as a Protection Island Paid On-Call member. I understand that the City of Nanaimo will use the information collected to determine my eligibility and suitability as a Protection Island Paid On-Call member and if selected, I understand that the City of Nanaimo will use the information to establish, manage, and/or terminate my on-call status with Station 7 on Protection Island.					
SIGNATURE		DATE			