



Bigfork Fire Department

We appreciate your interest in Bigfork Fire Department and your community. Your application is important to us and we want you to know what to expect from us:

- Meeting with fire member & tour of facilities
- Fill out and return application packet as soon as possible:
 - Application
 - Release for background investigation (notarized)
 - Release for driving record search
 - Sign confidentiality agreement
- Interview with selection committee at your convenience and become part of the team
- After completion of background check, you will be required to have a post-hire physical and post-hire drug test paid for by the department
- Attend Wednesday night Fire Dept. meetings/trainings to get to know us and for important on the job training
- Start your training and get your gear

Contacts

- Bigfork Fire Hall - 837-4590

New member application

Thank you for showing interest of becoming a member of the Bigfork Fire Department. We are proud of the emergency services that we provide to our community. Our members are the foundation of this organization. Being a member of the Bigfork Fire Department includes a commitment to our fellow members, the citizens of Bigfork and to the residents of the surrounding areas that we serve. This commitment must be backed with individual responsibility. Each member is accountable for his or her own actions. Before you complete the application, we want to make sure that you understand what will be expected of you as a new member. Below are seven (7) standards that we believe are essential that each new member must commit too.

1) **Make the commitment**

Being a member of the Bigfork Fire Department is a commitment to other department members, the organization and to the citizens of Bigfork. The Department is a very diverse work force but the one thing we share is the sincere desire to serve the citizens of Bigfork. It is our goal to deliver fast, safe and effective emergency response. We are held accountable for people's lives and property.

2) **Be accountable to ourselves and each other**

Members are provided with the training, equipment, procedures, leadership, supervision and feedback necessary to prepare and guide them. But the bottom line is that each member is responsible for his/her own performance. Each member's stature in the organization is reinforced by his/her conduct and performance.

3) **Be Self-Disciplined**

Self-discipline is the foundation for managing behavior. A positive, well balanced work environment is maintained by commitment and discipline, preferably self-discipline. Members are expected to manage their own behavior in a manner that conforms to the Rules and Regulations of the department. In theory, members should require very little supervision.

4) **Be a Responsible Leader**

In the department, we have formal leaders while others are informal leaders. We should periodically ask ourselves whether our words or actions are undermining our ability to address future situations or problems that one may encounter with members of the department. Actions speak louder than words.

5) **Willing to work together for the betterment of the Department**

Members are the foundation of our organization. The Department can be no better or stronger than its membership. The willingness to work on committees to help manage new ideas and changes in the organization is important.

6) **Support Our Member's Wellness**

Being a member of the Bigfork Fire Department means commitment to supporting other members. We are family. When one of our brothers or sisters is suffering or needs support, it is our duty to identify and address their needs.

7) **Maintain a Positive Environment**

We must all accept the responsibility associated with maintaining a safe, positive, productive environment, delivering quality service and for cultivating change and improvement in the future.

Four behaviors that should be practiced on a daily basis:

- 1) **Consideration:** Be considerate of one another's values, ideals, possessions, feelings, etc. Respect yourself, your colleagues and customers.
- 2) **Discretion:** Be discrete regarding personal information. If you are told something in confidence, keep it confident unless it jeopardizes someone's safety or well-being. Don't talk about members behind their backs. If you are willing to say it out loud, be willing to say to the member in person.
- 3) **Acceptance:** Accept our cultural, ethnic and gender differences. This diversity makes us stronger and better prepared to serve the needs of our community.
- 4) **Unity:** Value the unity of the Department. Our members have a strong commitment to each other. We are family and we take care of one another.

Volunteer/Paid Application

Bigfork Fire Department

Application Date ___/___/___

Name _____

Physical Address _____ Mailing Address _____

Phone #: Work: _____ Home: _____ Cell: _____

Email address: _____

How long have you lived in Bigfork? _____ Highest level of Education: _____

Employment References: (List Current First)

<u>Employer</u>	<u>Address</u>	<u>Phone</u>
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Personal References:

<u>Name</u>	<u>Address</u>	<u>Phone</u>
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Other Fire Departments or Emergency Organizations you have belonged to: _____

Have you ever been convicted of a felony? (If yes, please explain) _____

Do you have any physical, mental, or medical impairment or disability that would limit you in job performance? (If yes, please explain) _____

Special Skills and/or Qualifications:

<u>Schools</u>	<u>Location</u>	<u>Dates</u>
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List any foreign language you speak, read, and/or write: (including sign) _____

What are your reasons for wishing to join Bigfork Fire Department? _____

Are there any hours of the day that you are NOT able to perform your call duties? _____

State any additional information you feel may be helpful to us in considering your application:

Medical Certifications:

Emergency Medical Training:

EMT-F EMT-B EMT-I EMT-P

List any endorsements: _____

Please provide copies of State and National EMT Cards, Healthcare Provider Card, and Immunizations. (Hep A, Hep B, MMR, Tdap, Varicella, TB)

I certify that the information on this application is true and correct to the best of my knowledge. If I am appointed on the basis of any misstatement herein, I shall be subject to removal.

Signature: _____ Date: _____

DO NOT WRITE HERE: (Administrative Use Only)

Date Received: _____ Date Interviewed: _____

Comments: _____

Accepted? _____ Date: _____ Type of Membership: _____

Probationary beginning date: _____ Recommended probation to end: _____

Notes: _____

BIGFORK, MONTANA 59911
PHONE: (406) 837-4590 FAX: (406) 837-4690

I, _____, am seeking employment or volunteer assignment with Bigfork Fire District. I acknowledge that an investigation into my background is to provide safety for employees and patients of Bigfork Fire District. I hereby expressly and voluntarily give Bigfork Fire District the right to make this investigation of my past employment, education, and activities. I specifically authorize the release of any and all information of a confidential or privileged nature, including confidential criminal record information to the employees of Bigfork Fire District and its agents. I understand that Bigfork Fire District reserves the right to use any lawful method of investigation that, in its sole discretion, it deems reasonable and necessary.

I hereby release Bigfork Fire District and any organization, company, institution, or person furnishing information to Bigfork Fire District and its employees as expressly authorized above, from any liability for damage which may result from any dissemination of the information requested.

This document is effective until revoked in writing by me.

SIGNATURE

DATE

PRINT FULL NAME: _____

PRINT FULL ADDRESS: _____

CITY

STATE

ZIP

BIRTH DATE: ___/___/___ SSN#: ___/___/___ DRIVER LICENSE#: _____ STATE _____

STATE OF Montana)

: Sis.

County of Flathead)

Signed and sworn to before me this ____ day of _____, 20____, by _____
Printed name of applicant

IN WITNESS WHEREOF, I have hereunto set me hand and affixed my notary seal the day in this certificate first above written.

(Seal)

Notary Public, State of Montana

County of _____

My commission expires _____

Confidentiality Agreement

This confidentiality Agreement (this "Agreement") is made effective as of _____,
by and between Bigfork Fire District of 810 Grand Dr. Bigfork, MT 59911 and
_____.

Confidentiality

_____ recognizes that Bigfork Fire District has and will have information regarding matters such as personal and medical, and other vital information (collectively, "Information"), which are valuable, special and unique assets of Bigfork Fire District.

As a member, _____ agrees that he/she will not at any time or in any manner, directly or indirectly, divulge, or communicate in any manner any information about patients treated or transported to any third party without the prior written consent of Bigfork Fire District. As an employee, _____ will protect the information and treat it as strictly confidential. A violation by _____ of this paragraph shall be a material violation of this Agreement and will justify legal and/or equitable relief. As a member, discipline will be determined based on the severity of the breach and will include suspension and possible termination of membership.

EMPLOYER:
Bigfork Fire District

By: _____ Date _____
Mark J. Thiry, Chief

Employee: _____ Date _____

Print Name: _____



Bigfork Fire District

810 Grand Dr, Bigfork, MT 59911
406-837-4590 406-837-4690(fax)

www.bigforkfire.com

BIGFORK FIRE DISTRICT

DISCLOSURE & RELEASE FORM

In connection with my application for employment (including contract for services) with Bigfork Fire District, I understand that motor vehicle reports, which may contain public record information, may be requested from the department of motor vehicles agency. These reports may include but are not limited to the following type of information: name, address, social security number, date of birth, driver license or I.D. number, and driver record. I also understand that the information included in such reports will be taken into consideration in deciding whether to offer me employment.

I authorize, with reservation, any party or agency contacted by Bigfork Fire District to furnish the above-mentioned information.

I understand that:

- Bigfork Fire District obtains all drivers and vehicle information directly from the various state department of motor vehicles (or a corresponding agency) and does not maintain its own database of driver and vehicle information.
- Bigfork Fire District acts only as a courier and has no control over any of the information that a state discloses in my driver record or vehicle report.
- If there is something inaccurate on my driver or vehicle report, I must contact the department of motor vehicles directly to have the information corrected or updated.

I hereby authorize procurement of motor vehicle records. If hired (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for you to procure motor vehicle reports at any time during my employment (or contract) period.

Print Full Name: _____ Date of Birth: _____

Driver's License #: _____ Issuing State: _____ Exp. Date: _____

Applicant's Address: _____

Applicant's Signature: _____ Date: _____