



WAYNESBORO FIRE DEPARTMENT

Chief Robert H. Parrish III

706 N Liberty Street • Waynesboro, GA 30830-1448

706-554-8037 • Fax: 706-554-8009 • www.waynesboroga.com



Reserve Firefighter Application Pack

**Return Application and signed Privacy Act Statements
with copy of driver's license and social security card**



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Becoming a Reserve Member

In order to be considered for initial appointment as a Reserve Member one must meet the minimum requirements below;

1. Be at least 18 years of age.
2. Valid driver's license and dependable transportation.
3. Successfully pass a drug screen.
4. Be a legal United States citizen or possess valid and current documentation to be legally employed in the State of Georgia. (eVerify)
5. No felony conviction in any jurisdiction within ten years prior to appointment (except as provided in O.C.G.A. §25-4-8).
6. Have a good moral character as determined by investigation of the criminal history of the candidate to verify that there are no recent patterns of criminal involvement or intent related to stealing, cheating, lying, or other offenses that may indicate a disregard for the law or ethical and moral conduct.
7. Be in good physical condition as determined by a medical examination.
8. Successfully complete the GFSTC approved physical agility test.

After appointment, Reserve Members shall meet a minimum standard of 50% of the aggregate of creditable department drills or meetings and creditable calls for the calendar year using a point based system. One point shall be earned for each eligible call, and one point for each completed hour of designated department drills or meetings held as a group.

Drills are held each Tuesday (6-8 pm) and/or Friday (2-4 pm)

There is a \$25 benefit for each structural fire call attended. If the call is over 1 hour in duration then an hourly rate of \$10 will be applied to the time over 1 hour. Training class attendance will be paid at a rate of \$10 per class attended. In order to receive credit and pay, reserves must sign the training record and field report. Pay checks are issued on the Friday after the end of the 28 day pay cycle.

Failure to show an effort to fulfill the attendance and training requirements will result in termination from the department.

Reserve Member Levels

Reserve Support Firefighter (minimum requirement)

Firefighters who are limited as to their fire ground function and do not participate in activities which may require them being in close proximity to any hazardous zones including interior fire suppression, climbing a ladder and using Self Contained Breathing Apparatus (SCBA)

1. Successfully complete (within 6 months) the Volunteer Support Firefighter training course and;
 - a. AHA BLS CPR
 - b. AHA First Aid
 - c. AHA Blood borne Pathogens
 - d. IS-100 Intro to Incident Command
 - e. IS-700 Intro to National Incident Management System
 - f. Haz-Mat Awareness
2. Successfully pass the GFSTC written test.

Reserve Suppression Firefighter (optional)

Firefighters with increased fire ground function who can perform in hazardous zones including interior fire suppression, climbing a ladder and using SCBA under direct supervision of State Certified Firefighters.

1. Successfully complete (within 18 months) the Volunteer Suppression Firefighter training course.
2. Structural Fire Control class (settee and at-grade)
3. Successfully pass the GFSTC written test.

State Certified Firefighter (optional)

Firefighters who can perform any function on the fire ground without direct supervision and can supervise Support and Suppression Firefighters.

1. Successfully complete the Basic Firefighter Training Course including Haz-Mat Operations
2. Structural Fire Control Class (above and below grade)
3. Climb aerial ladder (110')
4. Possess a high school diploma or GED
5. Successfully pass the GFSTC written and skills test.

NON-CRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a Georgia only or a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulation (CFR), 50.12, among other authorities.

- You must be provided written notification that your fingerprints/biometrics will be used to check the criminal history records maintained by the Georgia Crime Information Center (GCIC) and the FBI, when a federal record check is so authorized.
- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared or explained.
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on the information in the criminal history record.
- If agency policy permits, the officials may provide you with a copy of your criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may find information regarding how to obtain a copy of your Georgia criminal history record at the GBI website: <https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions> Information regarding how to obtain a copy of your FBI criminal history record is located at the FBI website: <https://www.edo.cjis.gov>
- If you decide to challenge the accuracy or completeness of your criminal history record, you should contact and send your challenge to the agency that contributed the questioned information. If the disputed arrest occurred in the State of Georgia, you may send your challenge directly to the GCIC. Contact information for the GCIC can be found at <https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions> Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenge entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for the authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

Privacy Act Statement

This privacy act statement is located on the back of the FD-258 fingerprint card.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI. Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket

Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 02/04/2021

I have received a copy of the Privacy Rights and Privacy Act Statement Notification

Signature _____

Date _____

City of Waynesboro

Application for Employment



PRE-EMPLOYMENT QUESTIONNAIRE

AN EQUAL OPPORTUNITY EMPLOYER

Position applied for _____

Date _____

You must complete a separate application for each position

Personal Information Phone No. _____ Cell phone No. _____

Name _____ Social Security Number - - -
Last First Middle

Address _____
Street City State Zip

Driver's license number _____ State _____

Are you 18 years or older?..... Yes No

Are you related to another employee of the City of Waynesboro? Yes No

Are you legally eligible for employment in this country? Yes No

Have you ever been employed here before? If yes, give date and position? Yes No

Have you ever pled "guilty" or "no contest" to or been convicted of a felony in the last 7 years? Yes No

If yes, please provide dates and details. _____

Date available to start work..... ___/___/___ Desired salary.....\$ _____

Educational Background No. of years Did you
Name and location of school Attended Graduate? Subjects studied?

High School _____

College _____

Other _____

List any other special training or skills. _____

References

Give the names of three persons not related to you, whom you have known at least one year.

	<u>Name</u>	<u>Address</u>	<u>Business</u>	<u>Phone No.</u>	<u>Years Acquainted</u>
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

Employment History

Provide the following information starting with most recent.

<u>Dates</u>	<u>Name, Address, & Phone # of Employer</u>	<u>Salary</u>	<u>Position</u>	<u>Reason for Leaving</u>
-	_____	_____	_____	_____
-	_____	_____	_____	_____
-	_____	_____	_____	_____
-	_____	_____	_____	_____

U.S. Military or Naval Service _____ Rank _____ Current status _____

Emergency Contact

Give the name of an individual to be contacted in case of an emergency.

Name	Address	Phone No.

"I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the City. I understand that any employment is conditioned on a background check, MVR, and drug testing. I authorize the City of Waynesboro to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the City, without giving me prior notice of such disclosure. I authorize the City of Waynesboro to receive any **Criminal History Record** and **MVR** information pertaining to me which may be in the files of any state or local criminal justice agency. In addition, I release the City, and former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure. I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. If hired, I agree to abide by all City work rules, policies and procedures and that the City retains the right to revise its policies or procedures, in whole or in part at any time."

Date _____ **Signature** _____

To Be Completed By Supervisor

Results of **Criminal History Check**: _____

Results of **Motor Vehicle Report**: _____

Results of **Drug Screen**: _____ Date of Test: _____

Interviewed by: _____ and _____ Date _____

Remarks: _____

Remarks of **Former Employers and References** contacted: _____

Terms of Employment: Full-time Part-time Status: Permanent Temporary

To Be Completed By Accounting & Personnel

Hired: Yes No **If yes**, complete the following. **If no**, state the reasons in the above remarks section.

Date of Birth _____ Date reporting to work _____

Hire Date _____ Grade & Step _____ Salary or hourly rate \$ _____

Department _____ Job Title _____

Remarks: _____

Approved: _____

Department Head

City Administrator

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