

Black Butte Ranch Rural Fire Protection District

Employment Application

Black Butte Ranch Rural Fire Protection District provides equal employment opportunity to all qualified employees and applicants, without regard to race, color, religion, sexual orientation, national origin, age, disability, genetic information, or any other status protected by applicable federal, Oregon, or local law. No application will be rejected because of a disability that, with reasonable accommodation, does not prevent the performance of the essential job duties.

IF HIRED, THIS APPLICATION WILL BECOME A PART OF YOUR PERMANENT PERSONNEL FILE. PLEASE COMPLETE LEGIBLY.
YOUR APPLICATION MAY NOT BE CONSIDERED IF INCOMPLETE OR SUBMITTED PAST AN ESTABLISHED DEADLINE.

Position		
Position Applying For	Available Start Date	Today's Date

Personal Information			
Name			
Address	City	State	Zip
Email Address	Phone Number	Mobile Number	
Are you able, at the time of employment, to submit verification of your legal right to work in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/>			

Education				
Do you have a high school diploma or GED Certificate? Yes <input type="checkbox"/> No <input type="checkbox"/>				
School Name	Location	Diploma/Degree	Major/Minor	Did you Graduate?
				Yes <input type="checkbox"/> No <input type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>

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Employment History			
This information in this section may be used to determine if you meet the minimum and/or preferred qualifications as outlined in the job announcement. Clearly describe all your duties, starting with your most recent job. Resumes will be accepted only if required on the job announcement and will not be accepted in place of a completed application. If you need additional space, attach a separate sheet.			
Employer (1)		Job Title	Date Employed (From-To)
Address	City	State	Zip
Supervisor Name	Phone #	May we contact?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Reason for leaving			
Duties			
Employer (2)		Job Title	Date Employed (From-To)
Address	City	State	Zip
Supervisor Name	Phone #	May we contact?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Reason for leaving			
Duties			
Employer (3)		Job Title	Date Employed (From-To)
Address	City	State	Zip
Supervisor Name	Phone #	May we contact?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Reason for leaving			
Duties			

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Minimum Qualifications (Please indicate if you meet the following minimum qualifications)	
18 Years of age or older	Do you meet this qualification? Yes___ No___
Valid Oregon Drivers License or ability to obtain	Do you meet this qualification? Yes___ No___
Associates Degree	Do you meet this qualification? Yes___ No___
Oregon EMT-P or NREMT-P	Do you meet this qualification? Yes___ No___ If "No" do you have the ability to obtain Oregon reciprocity? Yes___ No ___
CPR Certified	Do you meet this qualification? Yes___ No___
NWCG Wildland Firefighter 2 (or equivalent)	Do you meet this qualification? Yes___ No___
NFPA Firefighter 1 (or equivalent)	Do you meet this qualification? Yes___ No___
NFPA Driver (or equivalent)	Do you meet this qualification? Yes___ No___

Desired Qualifications (Please indicate if you meet any of the following desired qualifications)	
Associates Degree or higher in Firefighting and/or EMS	Do you meet this qualification? Yes___ No___
NWCG Wildland Operator (or equivalent)	Do you meet this qualification? Yes___ No___
NFPA Pumper Operator (or equivalent)	Do you meet this qualification? Yes___ No___
NFPA Aerial Operator (or equivalent)	Do you meet this qualification? Yes___ No___
NFPA Instructor 1 (or equivalent)	Do you meet this qualification? Yes___ No___
NWCG Single Resource Boss-Engine (or equivalent)	Do you meet this qualification? Yes___ No___
NFPA (or equivalent) Hazardous Materials Awareness	Do you meet this qualification? Yes___ No___
NFPA (or equivalent) Hazardous Materials Operations	Do you meet this qualification? Yes___ No___
NFPA (or equivalent) Hazardous Materials Incident Commander	Do you meet this qualification? Yes___ No___
NIMS ICS-100, ICS-200, ICS-300, ICS-400, ICS-700, ICS-800	Circle all that apply.
Blue Card Certified	Do you meet this qualification? Yes___ No___

IMPORTANT: Please submit a copy of all of the above minimum qualifications and/or desired qualifications (if applicable) with your application as proof. Incomplete or missing proof of any information requested will cause an application to be rejected.

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Veterans & Volunteer Preference (will you be claiming veterans and/or BBR volunteer preference)		
Veterans Preference **Yes ___ No ___	Disabled Veterans Preference ** Yes ___ No ___	BBR Volunteer Preference †Yes ___ No ___

Veterans Preference

**Qualifying veterans and disabled veterans may obtain preference by submitting, as verification of eligibility, a copy of the Certificate of Release or Discharge from Active Duty (DD Form 214 or 215) or a letter from the US Dept. of Veterans Affairs indicating receipt of a non-service connected pension to their application. Disabled veterans must also submit a copy of their VA disability preference letter from the US Dept. of Veterans Affairs, unless the information is included in the DD Form 214 or 215.

Veterans meeting eligibility shall qualify for five (5) additional points.

Disabled Veterans meeting eligibility shall qualify for ten (10) additional points.

For additional information on Veterans' Preference eligibility, including definition of the terms "veteran" and "disabled veteran," contact the Oregon Dept. of Veterans' Affairs at 1-800-692-9666.

Black Butte Ranch RFPD Volunteer Preference

Black Butte Ranch (BBR) Volunteer Preference status shall be given to all District volunteer firefighters who have satisfactorily served a minimum of two (2) years with the District in the last (5) five years. A District volunteer meeting these requirements shall qualify for five (5) additional points provided a passing grade has been attained on the examination. The five (5) additional points shall be applied to each stage of the testing process.

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References	
Name: _____	Title: _____
Company: _____	Relationship to you: _____
Phone: _____	Email: _____
Name: _____	Title: _____
Company: _____	Relationship to you: _____
Phone: _____	Email: _____
Name: _____	Title: _____
Company: _____	Relationship to you: _____
Phone: _____	Email: _____

Completed applications must be received no later than
4:00 pm, Friday, April 8th, 2022.

Applications Can be Mailed to:

**Chief Dan Tucker
PMB 8190 POB 8000
Black Butte Ranch, OR 97759**

OR

By UPS, FEDEX, Hand Deliver:

**Chief Dan Tucker
13511 Hawks Beard
Black Butte Ranch, OR 97759**

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Certification and Signature

I hereby certify that all statements made in this application are true, and I agree and understand that any statement that is false, fraudulent, or misleading in this application or attached material, during the interview or screening process, or discovered during any employment-related process (post hire) may result in the revoking of a job offer or termination of employment.

- I certify that all statements contained herein are true and complete.
- I understand that I must provide proof that I am authorized to work in the United States, in accordance with federal law, if I am hired.
- I authorize the employing agency to verify the employment and education information provided in this employment application.
- I authorize my driving record to be checked if the position for which I am applying requires driving.
- I understand and agree to be subjected to a pre-employment drug screening, criminal history background check, and psychological evaluation, if applicable.
- I am able to perform the essential duties of this position as advertised, with or without reasonable accommodation.

___ Yes ___ No

___ Yes w/ accomodation - Please provide a description of needed accomodation with your application.

Printed Name: _____

Signature: _____

Date: _____