

5701 N. Clinton Street.

TERRE HAUTE, IN 47805

812-466-0911

FAX 812-466-2150

EMPLOYMENT APPLICATION

FOR CAREER FIREFIGHTER POSITION

Career firefighter applicants shall meet the following requirements for hiring consideration;

- United States Citizen
- High School Graduate
- Minimum 18 years of age, Maximum 40 years of age at date of hire
- Valid Indiana Driver's License
- Clear Background Check and Drug Screening
- Valid CPAT Test (within previous 12 months of date of hiring announcement)
- Certified FF I & II
- Certified Technical Rescue Awareness
- Certified Hazardous Materials Operations
- Certified Emergency Medical Technician- Basic
- NIMs 100, 200, 700, 800

The applicant shall pass PERF physical and mental examination prior to hire

Paid Employees shall be on Probationary Status during their first year of employment. This shall be 365 days from date of first shift worked.

Firefighters shall demonstrate expertise in the following benchmark proficiencies while on probationary status;

- Complete Driver/Operator Checkoffs on all department apparatus.
- Proficiency with department firefighting and EMS equipment.
- Knowledge of department SOGs and EMS Protocols.
- Familiarity with district.
- Capability of performing assignments satisfactorily.
- Demonstrate efficient, professional and courteous interactions with coworkers and public.

Initial Firefighter position(s) will work 8-hour shifts. When sufficient firefighters are employed, the work shift will transition to traditional 24-hour duty shifts (24 hrs. on/48 hrs. off). This will be at the discretion of the administration.



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Pre-Employment Background Check and Drug Screening may be obtained at;

Right Choice DAT 3205 S. 3rd Place (behind Terre Haute City Center) Terre Haute, IN 47802 (812) 235-3153

No appointment necessary. Inform them that this is for Otter Creek Township Fire Department. Right Choice DAT will send results to the department.

Testing fees are at applicant's expense.

CPAT (Candidate Physical Ability Test) testing is available through;

Vincennes University https://www.vinu.edu/workforce-development/cpat-faq.html (812) 888-2871

Wayne Township Fire Department https://esec.wayne.k12.in.us/courses-training/cpat (317) 988-7703

Evolution Training Center Columbus Public Safety Training Facility evolution@columbus.in.gov (812) 376-2670

Contact the organization of your choice above for scheduling. Other organizations offering CPAT may be acceptable to the OCFD. If you prefer to use a different organization than those listed, please contact the OCFD for validation of acceptance.

Testing fees are at applicant's expense.



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(PLEASE PRINT LEGIBLY OR TYPE)

NAME			
Last	First		Middle
MAIDEN NAME (if applicable)			
SOCIAL SECURITY NUMBER			
DATE OF BIRTH			
HOME PHONE	CELL		
HOME ADDRESS			
CITY		STATE	ZIP
E-MAIL ADDRESS			
DRIVERS LICENSE NUMBER		TYPES	ГАТЕ
EXPIRATION DATE			
HEIGHT WEIGHT	HAIR COLOR	EYE COLOR	
PLACE OF BIRTH			
BLOOD TYPE (If known)	_		
ALLERGIES			
DUBLIC SAFEETY IDENTIFICATION	NI IMBED (DSID)		



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IN CASE OF EMERGENCY:		
PRIMARY EMERGENCY CONTACT:		
NAME_	RELATIONSHIP	
ADDRESS:		
2 PHONE NUMBERS		
SECONDARY EMERGENCY CONTACT:		
NAME	RELATIONSHIP	
ADDRESS		
2 PHONE NUMBERS		
YOUR CURRENT EMPLOYER:		
ADDRESS		
CITY	STATE	ZIP
PHONEPOSITION HEI	LD	
DUTIES		
YOUR CURRENT SUPERVISOR:		
MAY WE CONTACT YOUR CURRENT EMPLOYER?YES		
NUMBER OF YEARS AT CURRENT EMPLOYEMENT		
LIST LAST THREE EMPLOYERS:		

_____ From : To _____

_____From : To_____



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BACKGROUND:
HAVE YOU EVER BEEN CONVICTED OF A FELONY?YESNO
HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR?YES NO
HAVE YOU EVER RECEIVED A TRAFFIC TICKET? (INCLUDE PARKING)YESNO
IF YES, EXPLAIN (INCLUDE DATE, LOCATION, CHARGE, FINE OR SENTENCE)
HAS YOUR DRIVERS LICENSE EVER BEEN SUSPENDED/REVOKED?YES NO IF YES, EXPLAIN
HAVE YOU EVER BEEN DISMISSED OR ASKED TO RESIGN FROM A POSITION OF EMPLOYMENT?YESNO
IF YES, EXPLAIN
CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT THE MISREPRESENTATION OR OMISSION OF FACTS IS CAUSE FOR REJECTION OF MY APPLICATION OR DISMISSAL AFTER APPOINTMENT. IF ANY OF THE INFORMATION PROVIDED IN THIS APPLICATION CHANGES, I UNDERSTAND THAT I AM RESPONSIBLE FOR PROMPTLY IPDATING THAT INFORMATION IN WRITING.
I AUTHORIZE THE OTTER CREEK FIRE DEPARTMENT TO CONDUCT AN APPLICATION BACKGROUND INVESTIGATION.
SIGNED: DATE
PLEASE SUBMIT APPLICATION TO:
OTTER CREEK FIRE DEPARTMENT
5701 N. CLINTON ST.
TERRE HAUTE, IN 47805



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PLEASE ATTACH COPIES OF THE FOLLOWING DOCUMENTS, AS WELL AS ANY OTHER RELEVANT CERTIFICATIONS THAT YOU WOULD LIKE TO FURNISH.

☐ High School Diploma or GED ☐ Driver's License ☐ Valid CPAT Test (within last 12 months) ☐ NIMs 100, 200, 700, 800 ☐ Firefighter I & II ☐ Hazardous Materials Awareness & Operations ☐ Technical Rescue Awareness ☐ EMS Certification (EMT-B Minimum) ☐ Vehicle Rescue/Extrication (Optional)

Driver/Operator (Optional)

INFORMATION AND CERTIFICATION CHECKLIST: