

Fire District 3

8383 Agate Road
White City, OR 97503
541-826-7100
www.jcfd3.com



Employment Application

Fire District 3 provides equal employment opportunity to all qualified employees and applicants, without regard to race, color, religion, gender, sexual orientation, national origin, age, disability, genetic information, veteran's status, 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 performance of the essential job duties.

To claim veterans' preference in hiring, complete the Veteran's Preference Form and submit it with the required documentation at the time you submit this application.

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

Position	
Position Applying For	Today's Date

Personal Information			
Name			
Address	City	State	Zip
Best Contact Number	Email Address		
Are you able, at the time of employment, to submit verification of your legal right to work in the United States? (Proof of identity will be required upon employment) Yes No			

Education				
List any colleges, military, trade, business or other schools attended.				
Do you have a high school diploma or GED Certificate? Yes No				
School Name	Location	Diploma/Degree	Major/Minor	Did you Graduate?

Certificates & Licenses			
List all ACTIVE professional licenses, registration, or certificates required or preferred for the position.			
Type	Issuing Agency and Number if Applicable	Date Issued	Date Expires

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Employment History

The information in this section will be used to determine if you meet the minimum qualifications as outlined in the job announcement.
Clearly describe all your duties, starting with your most recent job. If you need additional space, attach a separate sheet.

Employer	Job Title	Dates Employed (from/to)	
Address	City	State	Zip
Supervisor Name	Phone Number	May we contact? <div>YesNo</div>	
Reason for Leaving			
Duties:			

Employer	Job Title	Dates Employed (from/to)	
Address	City	State	Zip
Supervisor Name	Phone Number	May we contact? <div>YesNo</div>	
Reason for Leaving			
Duties:			

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Employer	Job Title	Dates Employed (from/to)	
Address	City	State	Zip
Supervisor Name	Phone Number	May we contact? Yes No	
Reason for Leaving			
Duties:			

Employer	Job Title	Dates Employed (from/to)	
Address	City	State	Zip
Supervisor Name	Phone Number	May we contact? Yes No	
Reason for Leaving			
Duties			

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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 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 physiological screening if applicable to the position I have applied for.
- I understand and agree to a thorough personal and professional reference check.
- I am able to perform the essential duties of this position as advertised, with or without reasonable accommodation

Yes

No Explanation: _____

Signature: _____

Completed application and all required documents may be emailed to applications@jcf3.com, or delivered or mailed to:

Fire District 3

8383 Agate Road

White City, OR 97503

Faxed applications will not be accepted.

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Veterans' Preference Form (ORS 408.230)

Veterans who meet the minimum qualifications for a position open for recruitment may be eligible for preference in employment under Oregon law. **If you are a Qualified Veteran or Qualified Disabled Veteran and would like to be granted preference in the selection and hiring process for a specific posted job, please fill out this Veterans' Preference Form and provide proof of eligibility by submitting a copy of form DD-214 or 215 (copy 4).** This completed form and required supporting documentation must be submitted with your application for consideration for Veterans' Preference.

Qualified Veteran Questions: *Veterans' preference may be claimed if you check at least one of the boxes below and provide proof via form DD-214 or 215 (Copy 4)*

ORS 408.225(f) – I served on active duty with the Armed Forces of the United States:

For a period of more than 90 consecutive days beginning on or before January 31, 1955, and was discharged or released under honorable conditions

For a period of more than 178 consecutive days beginning after January 31, 1955, and was discharged or released from active duty under honorable conditions

For a period of 178 days or less and was discharged or released from active duty under honorable conditions because of a service due to a service-related disability

For a period of 178 days or less and was discharged or released from active duty under honorable conditions and have a disability rating from the United States Department of Veterans Affairs

For at least one day in a combat zone and was discharged or released from active duty under honorable conditions

And received a combat or campaign ribbon or an expeditionary medal for service in the Armed Forces of the United States and was discharged or released from active duty under honorable conditions

And am receiving a nonservice – connected pension from the United States Department of Veterans Affairs

Qualified Disabled Veteran Questions: *Additional preference may be claimed if you check at least one box below and provide proof of eligibility via a copy of DD214 or 15, Copy 4, and a public employment preference letter from the United States Department of Veteran's Affairs (letter may be requested by calling 800-827-1000).*

I am entitled to disability compensation under laws administered by the United States Department of Veterans Affairs; or

I was discharged or released from active duty for a disability incurred or aggravated in the line of duty; or

I was awarded the Purple Heart for wounds received in combat.

I hereby claim Veterans' Preference, have attached proof of eligibility as directed and certify that the above information is true and correct. I understand that any false statements may be cause for my disqualification, or dismissal, regardless of when discovered.

Signature: _____

Date: _____

Position Applied For: _____

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DEFINITIONS

Veteran's Preference Definitions as defined by OAR 839-006-0440

Armed Forces mean the United States Army, Navy, Marine Corps, Air Force, and Coast Guard, including the reserve components thereof. (Title 38 USC Part I Chapter 1 Section 101). Reserve components mean:

- (a) The Army Reserve;
- (b) The Navy Reserve;
- (c) The Marine Corps Reserve;
- (d) The Air force Reserve;
- (e) The Coast Guard Reserve;
- (f) The Army National Guard of the United States; and
- (g) The Air National Guard of the United States.

Active duty does not include attendance at a school under military orders, except schooling incident to an active enlistment or a regular tour of duty, or normal military training as a reserve officer or member of an organized reserve or a National Guard unit.

Combat zone means an area designated by the President of the United States by executive order in which, on the dates designated by executive order, the Armed Forces of the United States are or have engaged in combat.

Veteran means a person who:

- (a) Served on active duty with the Armed Forces of the United States:
 - For a period of more than 90 consecutive days beginning on or before January 31, 1955, and was discharged or released under honorable conditions;
 - For a period of more than 178 consecutive days beginning after January 31, 1955, and was discharged or released from active duty under honorable conditions;
 - For 178 days or less and was discharged or released from active duty under honorable conditions because of a service-connected disability;
 - For 178 days or less and was discharged or released from active duty under honorable conditions and has a disability rating from the United States Department of Veterans Affairs; or
 - For at least one day in a combat zone and was discharged or released from active duty under honorable conditions;
- (b) Received a combat or campaign ribbon or an expeditionary medal for service in the Armed Forces of the United States and was discharged or released from active duty under honorable conditions; or
- (c) Is receiving a nonservice-connected pension from the United States Department of Veterans Affairs.

Disabled veteran means a person who has a disability rating from the United States Department of Veterans Affairs, a person whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty or a person who was awarded the Purple Heart for wounds received in combat.

Jackson County Fire District 3

Application Acknowledgement Form

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE FULLY COMPLETED, SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THESE STATEMENTS, PLEASE ASK THEM BEFORE SIGNING.

1. All answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false, misleading, or incomplete information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize the District to obtain information about me from any of the prior employers or persons named in this application, including those provided by me as references. I also agree to sign an authorization releasing these prior employers and persons of liability for providing such information.

Please initial: _____

2. I understand that if I am offered employment, I will be required to pass a thorough background investigation including a criminal history check, a driver's record check, pre-employment drug screen (if applicable), and/or physical and psychological exam (if applicable) as a condition of being hired, depending on the position for which I am applying and consistent with applicable laws.

Please initial: _____

3. I understand that if I am hired I will be responsible for complying with all policies and rules of the District as they presently exist or are later modified. I also understand that except as otherwise provided in an applicable collective bargaining agreement, civil service rules, or other written agreement signed by the Fire Chief, that I may be suspended without pay, demoted, or discharged only for just cause. I further understand that during my first 12 months or probationary period, my employment with the District can be terminable at-will for any reason and at any time without notice, at the option of the District or myself, except as prohibited by applicable law.

Please initial: _____

I have read, understand and agree with all of the above statements.

Signature of Applicant

Date

NOTE: This application is only valid for the job position and job opening applied for. To be considered for other job positions or job openings, you must submit a new application.

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Risk Reduction Crew Supervisor - Supplemental Questionnaire

Name: _____ Date: _____

Please complete the following questionnaire. Answer each question truthfully and to the best of your knowledge. Ensure your application and resume matches this supplemental questionnaire.

Please note that you do not have to have every box checked with a "yes" to advance in the process.

This is only a summary of your experience and qualifications.

EXPERIENCE & QUALIFICATIONS

Possession of a HS degree or GED	Yes	No
Two (2) years' experience in wildland suppression	Yes	No
Do you have a college level degree in forestry or a closely related natural resources field and one year of wildland suppression?	Yes	No
Are you qualified as a Crew Boss (single resource) trainee?	Yes	No
Do you have a valid Oregon driver's license?	Yes	No

DESIRABLE QUALIFICATIONS - All boxes marked "yes" should be documented in your attached resume

• NWCG S-230 Crew Boss (CRWB) or NWCG Engine Boss (ENGB)	Yes	No
• NFPA Apparatus Equipped with a Fire Pump	Yes	No
Experience working in public safety or community services organization	Yes	No

COMPUTER SKILL ABILITIES - Check the programs you are proficient in

Years of professional experience operating hand tools and power equipment:	_____
Years of professional experience supervising others in a related position:	_____

MILITARY SERVICE

Have you served in a branch of the Military?	Yes	No
To receive Veteran's Preference points, you must complete and attach the confidential Veteran's Preference Form and submit a copy of your DD-214 or DD-215.		

I understand that misrepresentation or omission of facts called for in this supplemental questionnaire may be cause for cancellation of the application and/or dismissal from employment no matter how or when discovered.
My signature in the space below attests all of the above information is true and accurate.

Applicant Signature is REQUIRED