

Dear Applicant:

Thank you for your interest in taking our upcoming written Civil Service Exam. Enclosed is an application for original appointment to the Fire Department.

The application must be filled out completely, signed, and returned to this office no later than 5:00 p.m., May 7, 2013, including mailed applications. A study guide and any additional information necessary will be furnished when your application is returned.

Please check the Instruction Sheet for necessary documentation to be filed for prior fire training and/or veteran's credit.

The written examination for Firefighter is scheduled for Saturday May 18, 2013 at 9:00 a.m. Registration will begin at 8:15 a.m. The testing will be taking place in the cafeteria at Sandusky High School.

If you have any questions, please contact this office at (419) 627-5885 Monday through Friday, 8:00 a.m. through 5:00 p.m.

Sincerely,

Debbie S. Leslie, Human Resource Manager
The Civil Service Commission

**CIVIL SERVICE COMMISSION
SANDUSKY, OHIO
APPLICATION FOR ENTRANCE EXAMINATION
FIREFIGHTER**

INSTRUCTIONS TO APPLICANTS:

1. All information must be filled in completely. Failure to give truthful or complete information shall result in rejection of application.
2. At the time of testing, there will be a fee of \$20 payable by cash only.
3. Completed applications must be submitted to the Human Resource Division, Second Floor, City Building, 222 Meigs Street, Sandusky, Ohio, 44870, as soon as you have completed it. The deadline for submitting applications is **May 7, 2013 at 5:00 p.m. NO APPLICATIONS WILL BE ACCEPTED AFTER THIS DATE INCLUDING MAILED APPLICATIONS!**
4. If you have been honorably discharged from the military or transferred to the reserve with evidence of satisfactory service, and are a resident of Ohio, you may file a certificate of service or honorable discharge, in order to receive extra credit on the examination, if you achieve a passing score. Requests for veteran's credit *must* be submitted along with the application and must be accompanied by proof as described above. **VETERAN'S CREDIT REQUESTED AFTER THE FINAL DATE FOR FILING WILL NOT BE HONORED. You must receive a passing grade in order to receive military points.**
5. **Firefighter Applicants:** If you have a current Ohio Firefighter I & II and Ohio EMT basic level certification you may file copies of your certifications in order to receive extra credit on the examination, if you achieve a passing score. If you have a current Ohio EMT-Paramedic certification you *must* file copies of your certification in order to receive extra credit on the examination, if you achieve a passing score. Requests for fire certification credit must be submitted along with the application and must be accompanied by proof as described above. **FIREFIGHTER TRAINING CREDIT REQUESTED AFTER THE FINAL DATE FOR FILING WILL NOT BE HONORED. You must receive a passing grade in order to receive additional points.**
6. You must be a citizen of the United States.
7. **To qualify for the Fire examination, you must have reached the age of 18 on or before the date of appointment. No person is eligible to receive original appointment as a firefighter on and after the person's thirty-first birthday (ORC 124.42).**
8. Every applicant shall have a minimum of a high school education or its equivalent at the time of original appointment.
9. Every applicant shall have a valid Ohio driver's license at the time of original appointment.
10. Applicants who have successfully passed the Fire examination will be required to pass a job related physical agility test before placement on the eligibility list.
11. Applicants who have successfully completed all requirements will be numerically ranked on the eligibility lists for Firefighter.

Appointment will be made to the Fire Department from the eligibility lists, pursuant to Civil Service regulations.

Application For Employment

CITY OF SANDUSKY · 222 Meigs Street · Sandusky, OH 44870
Phone (419) 627-5885 · Fax (419) 627-5825



Full Time – Permanent Positions

Return to: Human Resources Division

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the Human Resources Department.

POSITION APPLIED FOR: _____

APPLICATION # _____

FOR OFFICE USE ONLY

PLEASE PRINT:

Name: _____ Date of Application: _____

Address: _____
Street Apt. City State Zip

Social Security #: _____ Telephone #: _____

Mobile/Other: _____ E-mail: _____

Have you ever submitted an application to the City of Sandusky? _____ If Yes, when? _____

Have you ever been employed by the City of Sandusky? _____ If Yes, when? _____

Are you legally eligible for employment in the United States? _____

If you are under 18, can you furnish a work permit? _____ Date available for work: _____

Have you ever been convicted of a crime? _____ If Yes, please provide details: _____

ANSWERING "YES" DOES NOT AUTOMATICALLY BAR EMPLOYMENT. Please use additional sheet if necessary.

Are you able to meet all of the attendance requirements of this position? _____

Are you able to work overtime if necessary? _____ Will you travel if the position requires it? _____

Do you have any friends / relatives currently employed by the City of Sandusky? _____

If Yes, who? _____

Military Service or Veteran Status? _____ If yes, please provide branch of service, rank, and job duties: _____

Type of employment desired: Full Time Police
 Part Time Fire

Driver's License Number: _____ State: _____

Have you ever been bonded: _____

RELEVANT EXPERIENCE Please provide information regarding relevant experience to the position you are applying for. This includes, but is not limited to present/past employers, assignments, or volunteer activities. Use additional sheets if necessary.

From / To _____ Employer/Organization _____
Telephone # _____ Address _____
Job title: _____ Supervisor _____ May We Contact? _____
Job duties/
Responsibilities _____
Reason for leaving _____ Final Rate of Pay: _____

From / To _____ Employer/Organization _____
Telephone # _____ Address _____
Job title: _____ Supervisor _____ May We Contact? _____
Job duties/
Responsibilities _____
Reason for leaving _____ Final Rate of Pay: _____

From / To _____ Employer/Organization _____
Telephone # _____ Address _____
Job title: _____ Supervisor _____ May We Contact? _____
Job duties/
Responsibilities _____
Reason for leaving _____ Final Rate of Pay: _____

From / To _____ Employer/Organization _____
Telephone # _____ Address _____
Job title: _____ Supervisor _____ May We Contact? _____
Job duties/
Responsibilities _____
Reason for leaving _____ Final Rate of Pay: _____

From / To _____ Employer/Organization _____
Telephone # _____ Address _____
Job title: _____ Supervisor _____ May We Contact? _____
Job duties/
Responsibilities _____
Reason for leaving _____ Final Rate of Pay: _____

PLEASE EXPLAIN ANY GAPS IN EMPLOYMENT:

Have you ever been fired or asked to resign from a job? _____ If yes, please explain: _____

Please explain why you would like to be considered for employment with the City of Sandusky. Use additional sheets if necessary.

RELATED INFORMATION: To what job related organizations (professional, trade, etc.) do you belong?

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran / reserve national guard or any other similarly protected status.

ORGANIZATION	OFFICES HELD

SKILLS AND QUALIFICATIONS

Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform the essential functions in the appointment for which you are applying:

EDUCATIONAL BACKGROUND

Name and Location	# of years completed	Graduated?	Course of Study
-------------------	----------------------	------------	-----------------

HIGH SCHOOL:

COLLEGE:

OTHER:

REFERENCES: Please provide at least 3 references who are not related to you. Use additional sheets if necessary.

NAME: _____ PHONE: _____

NAME: _____ PHONE: _____

NAME: _____ PHONE: _____

APPLICANT STATEMENT AND SIGNATURE (Signature Required for Application to be Complete):

I certify that all information I have provided in order to apply for and obtain employment with the City of Sandusky is true, complete, and correct. I agree and understand that omissions, misstatements, and falsifications will cause forfeiture on my part of all eligibility to any employment with the City of Sandusky and may be cause for rejection of this application, removal of my name from eligibility lists, or discharge from City service, whenever it is discovered. In addition, I give the City of Sandusky the right to investigate and verify any information obtained through the application process. Permission is granted and I release from any and all liability any employer, agency or individual assisting the City of Sandusky in providing relevant, job related information that will assist in this process. I expressly authorize, without reservation, the City of Sandusky, its representatives, members or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application. I hereby waive any and all rights and claims I may have regarding, the City of Sandusky, its agents, members or representatives, for seeking, gathering, and using such information all other persons, corporations, or organizations for furnishing such information about me.

My signature below acknowledges my understanding and agreement with the above.

I understand that an offer of employment is contingent upon the successful completion of a pre-employment background investigation, physical, psychological, polygraph, and/or drug and alcohol screen. If employed, I agree to provide proof of identity, relevant licensure or credentials, and authorization for employment in the United States. If I am hired, I understand that I am free to resign at any time and the City of Sandusky reserves the same right to request my resignation at any time. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that all conditions of employment including, but not limited to hours, benefits and salary are subject to change by the City of Sandusky at any time. I understand that no representative of the City of Sandusky is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the City Manager.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant (required): _____ **Date:** _____

THIS BOX FOR OFFICE USE ONLY:

WRITTEN EXAM SCORE: _____ INTERVIEW: (1) _____ (2) _____

START DATE: ____/____/____ WAGE: _____

Received:

Time Stamp

Affirmative Action Voluntary Information



COMPLETION OF INFORMATION BELOW IS VOLUNTARY

We consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To be completed by applicant on a voluntary basis. Not for interview purposes. To be filed separately from application.

Section 4112.04 (A) (10) of the Revised Code requires that the state and its political subdivisions file annual reports with the Ohio Civil Rights Commission. In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is **STRICTLY VOLUNTARY**. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Please be advised that this survey is **NOT** part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations.

PLEASE PRINT

Position(s) applied for: _____ Date: ____ / ____ / ____

Referral Source:

- | | | |
|--|--|---|
| <input type="radio"/> Walk In | <input type="radio"/> Government Employment Agency | <input type="radio"/> Private Employment Agency |
| <input type="radio"/> Employee: _____ | | <input type="radio"/> School |
| <input type="radio"/> Relative: _____ | | <input type="radio"/> Job Fair |
| <input type="radio"/> Newspaper: _____ | | <input type="radio"/> Company's Website |
| <input type="radio"/> Other: _____ | | |

Applicant Information

Name: _____ Telephone: (____) _____
Last First Middle

Address: _____
Street City State Zip

Male Female Disabled? Yes No Veteran? Yes No

Please Check One of the Following Equal Employment Opportunity Identification Groups:

- White (not of Hispanic or Latino Origin) Black (not of Hispanic Origin) Hispanic or Latino Asian
 Native American / Alaskan Native Native Hawaiian/ Pacific Islander Two or More Races (Not Hispanic or Latino)

For Administrative Use Only

Position(s): Available Not Available Other positions considered for: _____

Hired: Yes No Position hired for: _____

OCRC Job Classifications:

- | | | | |
|--|--|-------------------------------------|---|
| <input type="radio"/> Officials / Administrators | <input type="radio"/> Professional | <input type="radio"/> Technicians | <input type="radio"/> Protective Service |
| <input type="radio"/> Para Professional | <input type="radio"/> Administrative Support | <input type="radio"/> Skilled Craft | <input type="radio"/> Service / Maintenance |

Completed By: _____ Date: _____