Nine Mile Ridge Firefighter Application

Name **Birth Date**

Phone Number **E-mail**

Resident Address

Street/PO Box

City State Zip

Mailing Address

Street/PO Box

City State Zip

Are you legally entitled to work in the United States? Yes No

Are you 18 years of age or older? Yes No

Do you possess a valid AR Unrestricted Driver's License and a good driving record? Yes No

Do you understand that applicants will be required to provide a Driver's License Abstract and a Criminal Record Check for Vulnerable Sector? Yes No

Do you believe you are free of medical conditions that may preclude your participation as a volunteer firefighter? Yes No

Do you understand that volunteer firefighters are expected to be in good physical condition, and do you feel you are physically able to participate in a physical fitness related test as part of the selection process?

Yes No

Do you understand that successful applicants are required to remain without facial hair to ensure a self-contained breathing apparatus mask will form a positive seal on the face? Yes No

Additional Comments

Nine Mile Ridge Firefighter Application

Availability

Days	Nights	Check all that apply
Monday	Monday	
Tuesday	Tuesday	
Wednesday	Wednesday	
Thursday	Thursday	
Friday	Friday	
Saturday	Saturday	
Sunday	Sunday	

If accepted by the Fire Department, you will be required to attend regular biweekly Monday night training/practices (approximately 6:00 PM to 8:00 PM). Can you meet this requirement? Yes No

Do you understand that in order to be available for emergency call-outs, you must be able to arrive at the fire station promptly and have abstained from alcohol and drugs for the previous 8 hours? Yes No

Are you willing and able to retain and wear an emergency pager and respond to emergencies? Yes No

Are you willing and able to participate in the occasional weekend training program? Yes No

References

Name	Phone	Relationship

Terms and Conditions

By signing, you agree to all terms and conditions

Signature Signature required **Date** Date required

Nine Mile Ridge Fire Department

Background Check Authorization

Form BCA-046

Print name _____

(Last) (First) (Middle)

Former Name(s) and Dates Used: _____

Current Address: _____ Since (date): _____

Previous Address: _____ From (date): _____

Previous Address: _____ From (date): _____

Social Security Number: _____ Date of Birth:_____

Telephone Number: _____

Drivers License Number: _____ State: _____

_____

The information contained in this application is correct to the best of my knowledge. I hereby authorize Nine Mile Ridge Fire Department and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to the following areas: verification of social security number; current and previous residences; employment history; education background; any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal, or written, pertaining to me, to Nine Mile Ridge Fire Department or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

I hereby release Nine Mile Ridge Fire Department, the Social Security Administration, and its agents, officials, representative, or assigned agencies, including officers, employees, or related personnel both individually and collectively from any and all liability for damages of whatever kind, which may, at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release.

Signature: _____ Date: _____

Nine Mile Ridge Fire Department

Drug and Alcohol Policy

SECTION 1 - OBJECTIVE:

The Nine mile Ridge Fire Department recognizes the problem of drug and alcohol abuse in society, while also realizing that drug and alcohol dependency and abuse can be treated and controlled. We further recognize that drug use by members of this organization would be a threat to the public welfare and the safety of all department members. It is the goal of the policy to eliminate illegal drug usage through education, evaluation and rehabilitation of the affected personnel. The possession, use or being under the influence of alcoholic beverages or unauthorized drugs shall not be permitted while on duty or conducting official business in connection with the Nine Mile Ridge Fire Department.

The use, sale, consumption, possession or distribution of drugs or other controlled substances while on organization property owned or leased (including vehicles) or while engaged in organization business is strictly prohibited and will result in discipline up to and including termination of membership. Members shall be responsible for their guests brought onto organization premises. Any member who is using prescription or over the counter drugs, that may impair their ability to safely perform their job, or affect the safety and wellbeing of others, must notify an officer of such use before resuming any duties on behalf of the organization.

In order to assist in meeting the goals of this policy, the Nine Mile Ridge Fire Department shall take a pro-active approach to mitigate the problem of drugs and alcohol addiction and abuse in the following ways:

1. Education: It shall be the goal of this organization to provide information to all members regarding drug and alcohol abuse and resulting in negative effects.

2. Evaluation: Testing by urinalysis and/or breath analysis may be required of a member. Immediate medical attention will be requested and testing may occur when factors such as physical appearance, behavior, or other circumstances give good faith reason to question whether substance or alcohol abuse may be a factor. A member to be tested will be requested to sign a written consent to the test procedures and to the restricted release of test results. Failure to sign written consent will result in immediate suspension, pending and investigation.

3. Rehabilitation: The Nine Mile Ridge Fire Department shall provide any member who has tested positive or who comes forth on their own to advice of a problem with drugs or alcohol, with information regarding rehabilitation. The Nine Mile Ridge Fire Department is not obligated however, to continue membership of any person whose performance of essential job duties is impaired because of drug or alcohol use. Participation in rehabilitation shall not affect future service, nor will participation in such a program protect the member from disciplinary action for continued substandard job performance or rule infractions. The member may be referred to Banyan Drug and Alcohol Addiction Rehab Treatment Centers. Call 866-868-9705 for assistance. The cost of such rehabilitation shall not be borne by the organization.

SECTION 2 - POLICY:

1) No member of Nine Mile Ridge Fire Department shall respond to any alarm, drive any fire department owned vehicle, attend training drills, attend fire department meetings, be on fire department grounds or attend any fire department event while under the influence of either alcohol and/or any controlled substance.

2) A member shall be considered to be under the influence of alcohol when they appear visibly intoxicated, visibly under the influence of an illegal controlled substance or a controlled substance not used as prescribed.

3) The members of Nine Mile Ridge Fire Department agree not to consume any alcoholic beverages or illegal controlled substances while on fire department property, while on fire ground operations, while in fire department vehicles or while otherwise engaged in fire department activities. This includes all functions with the exception of a member's participation in private meetings or participation in conference functions where the member will not be expected to respond to an alarm.

4) No member of Nine Mile Ridge Fire Department shall come into contact with any Emergency Medical Services patient while visibly intoxicated or under the influence of an illegal controlled substance.

5) All members of the Nine Mile Ridge Fire Department shall sign this policy indicating that they have read and understand this policy, agree to be bound by the policy and consent to be tested for the presence of alcohol and/or controlled substances in accordance with this policy. Any member who refuses to sign this policy shall not be permitted to participate in any emergency or non-emergency fire department activities.

6) Any member of Nine Mile Ridge Fire Department convicted of driving at any time while under the influence of either alcohol and/or controlled substances shall have their fire department driving privileges suspended. Any conviction for driving under the influence of alcohol and/or a controlled substance will be reviewed by the Fire Chief for possible disciplinary actions.

7) No member, while wearing a Nine Mile Ridge Fire Department uniform, shall consume or serve any alcoholic beverages in public. Except as noted in Section 2, Paragraph 3 of this policy.

8) In the event any member is suspected of violating the terms and provisions of this policy, the highest ranking Fire Department Line or Administrative Officer may request the suspected member to undergo testing to determine the presence of alcohol or controlled substances. In addition, all members consent to such testing in the following events if alcohol and/or controlled substance abuse is suspected:
    a. Investigation of a vehicular accident involving fire department apparatus or involving a personal vehicle while responding to a fire department alarm or function.
    b. Investigation of a fire ground or training accident involving property damage or personal injury.
    c. When there is reasonable suspicion of either alcohol and/or controlled substance abuse.

SECTION 3 - TESTING:

Testing for alcohol may be done by way of a Preliminary Breath Test (PBT). In the event the results are 0.04% or above, the member shall have the right to seek private alcohol testing, at the member's expense, to confirm or deny the results of the PBT. The fire department is not bound by the results of the private test in relation to the time of the incident. Testing for a controlled substance shall be performed at the Medical Laboratory at North Complex Emergency Department located inHighland AR. Results of alcohol and/or controlled substance testing shall be released to the officer requesting the tests according to this policy. The Fire Department will not release the specific results of any specific testing to anyone other than the Line Officers and Administrative Officers of the department. However, should a member request a hearing before the Board or Directors, the results may be released as part of the hearing process. Testing for alcohol and/or controlled substance abuse will be conducted according to Arkansas State code, Arkansas Alcohol and Drug Free Workplace Act, Arkansas Alcohol and Drug-Free Workplace Act.

SECTION 4 - HEARING:

Any member who feels aggrieved by this policy may request a hearing before the Board of Directors at which time the member may present evidence of any private testing or witnesses on his or her behalf.

SECTION 5 - DISCIPLINARY ACTION:

Any member of Nine Mile Ridge Fire Department who violates this policy, including the refusal to participate in a test for alcohol or controlled substances is subject to discipline as determined by the Fire Chief or Assistant Chief. The penalty for a first violation is a minimum thirty (30) day suspension and up to possible termination of membership. The penalty for a second violation within any given two (2) year period is a minimum sixty (60) day suspension and up to possible termination of membership. Any member of Nine Mile Ridge Fire Department that continues to violate this policy will have their membership terminated after the third (3rd) offense in any given two (2) year period.

I have read and do understand that this policy is binding between Nine Mile Ridge Fire Department and myself. I hereby agree to its entirety.

Printed Name: _____ Date: _____

Signature: _____ Date: _____

FIRE/MEDICAL/MEETING TEXT

Printed Name: _____

Phone Number: _____

Phone Provider: _____ (Example: Verizon, Straight Talk, etc)

I _____ can or _____ cannot receive text messages on my phone.

I understand that I am to notify the chief or assistant chief immediately if my phone number and/or provider should change.

Signature: _____ Date: _____