



Application For Employment

Pro-Tec Fire Services of Canada, ULC
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Appleton, WI 54914 USA
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We consider applicants for all positions without regard to race, national or ethnic origin, colour, religion, age, sex, sexual orientation, marital status, family status, disability, or pardoned conviction.

Please Print or Type

Position(s) Applied For and Location: _____ **Date of Application:** _____

How Did You Learn About Us? Advertisement Friend Other

Last Name **First Name** **Middle Name**

Address *Number* *Street* *City* *Province* *Postal Code*

Cell number with area code Email Address

Have you ever been employed with us before? Yes No

If yes, give date(s)/location(s). Date _____ Location _____

Are you at least 18 years of age? Yes No

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you Canadian Resident or Permanent Resident of Canada? Yes No

Proof of citizenship or immigration status will be required upon employment.

On what date are you available to start work? _____

Are you available to work: Full Time _____ Part Time _____ Shift Work _____

Are you willing to work overtime when necessary? Yes No

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Education

Name and Address of School		Course(s) Studied	Years Completed	Diploma/ Degree
High School				
University or College				
Trade School				

Employment Experience

Begin with your most recent job and list all employers for the last **five** years. If possible, concentrate on Fire & Emergency Services - even if Volunteer or POC. Include part-time, full-time and all periods of employment. If there are gaps in time between jobs (drawing unemployment, illness, etc.) use one section below to explain each gap. You may exclude organizations which indicate race, national or ethnic origin, colour, religion, age, sex, sexual orientation, marital status, family status, disability, or pardoned conviction.

1. Name & Address of Employer:

Telephone Number: _____ Date(s) Employed - From: _____ To: _____

Reason for Leaving:

Work Performed:

2. Name & Address of Employer:

Telephone Number: _____ Date(s) Employed - From: _____ To: _____

Reason for Leaving:

Work Performed:

3. Name & Address of Employer:

Telephone Number: _____ Date Employed(s) - From: _____ To: _____

Reason for Leaving:

Work Performed:

4. Name & Address of Employer:

Telephone Number: _____ Date(s) Employed - From: _____ To: _____

Reason for Leaving: _____

Work Performed: _____

5. Name & Address of Employer:

Telephone Number: _____ Date(s) Employed - From: _____ To: _____

Reason for Leaving: _____

Work Performed: _____

References: Provide 3

Name	Occupation	Phone #	Email

Specialized Skills & Experience

Any unchecked boxes or unanswered questions will be assumed as not having the experience, qualification(s), or license(s), etc.

EXPERIENCE - Do you have experience in the following fields:

- Aircraft Rescue Firefighting** Yes No How many years in each service. Military (MOC 0149) _____ Civilian Airport _____
- Structural Fire Rescue** Yes No If yes, how many years in each service. Full Time _____ Volunteer or POC _____
- Industrial Fire Rescue** Yes No If yes, how many years in each service. Full Time _____ Volunteer _____
- Wildland/Forestry** Yes No If yes, how many years in each service. Full Time _____ Volunteer _____

REQUIRED CERTIFICATIONS & LICENSES - Proof of Certification and Licenses will be required.

- Firefighter level II in accordance with NFPA 1001** Yes No
- HazMat at the Operations Level in accordance with NFPA 1072 (472)** Yes No
- ICS or IMS 100** Yes No **ICS or IMS 200** Yes No
- Alberta (or equivalent from other Provinces) Class 3 Driver's License with Airbrake endorsement** Yes No
- Valid Medical First Responder & Health Care Practitioner CPR/AED or above** Yes No
- Higher level of Medical Training:** _____

Specialized Skills & Experience Continued

Any unchecked boxes or unanswered questions will be assumed as not having the experience, qualification(s), or license(s), etc.

MANDATORY VACCINATION - Proof of Vaccination will be required.

Are you fully Vaccinated for COVID-19? Yes No

Are you willing to take a booster vaccine if mandated by the Federal or Provincial Government? Yes No

OTHER SKILLS, LICENSES, & CERTIFICATIONS - Check those that apply.

Certified Airport Firefighter in accordance with NFPA 1003 Yes No

Certified Driver Operator in accordance with NFPA 1002 Yes No

Certified Fire Service Instructor in accordance with NFPA 1041 Yes No

Certified Fire Officer in accordance with NFPA 1021 Yes No

Certified Rescue Technician in accordance with NFPA 1006 Yes No

Certified HazMat Response in accordance with NFPA 1072 - Technician Yes No

Certified HazMat Response in accordance with NFPA 1072 - Incident Commander Yes No

Certified First Aid Instructor Yes No With which provider? _____

Certified SCBA Technician Yes No With which manufacturer? _____

ICS or IMS 300 Yes No ICS or IMS 400 Yes No Other Levels: _____

Do you hold a Valid RAIC from Transport Canada? Yes No If yes, from which Airport? _____

Do you hold a valid ROC-A License from Industry Canada? Yes No

List other job related skills and Qualifications from employment or other experience:

You may exclude organizations that indicate race, national or ethnic origin, colour, religion, age, sex, sexual orientation, marital status, family status, disability, or pardoned conviction.

Do you have any physical disabilities that will prevent you from executing any work required by an Airport Firefighter, Medical Responder, HazMat responder, or ARFF Driver Operator? Yes No

Are you Claustrophobic, Acrophobic, or Colour Blind? Yes No

Please provide a copy of your Military member's Personnel Record Resume (MPRR) (if applicable)

CERTIFICATE OF AUTHORIZATION AND RELEASE

I certify that answers given in this application are true and complete to the best of my knowledge. I release from all liability or legal claims every person seeking or providing information in connection with my application for employment, whether oral or written. A photocopy of this release shall be as valid as the original, and may be relied upon by all persons providing information. *I have read (or have had read to me), understand and agree to the above statement. (Please sign here).* _____

This application for employment shall be considered active for a period of time not to exceed **30 days**. After that time, applicants will be required to resubmit a completed application. *I have read (or have had read to me), understand and agree to the above statement. (Please sign here).* _____

In the event I am employed, I understand that any false or misleading information I knowingly provided in my application or interview(s) may result in discharge and/or legal action. I understand also that if employed, I am required to abide by all rules and regulations of the employer and any special agreements reached between the employer and me. *I have read (or have had read to me), understand and agree to the above statement. (Please sign here).* _____

Consent to the collection, use and disclosure of personal information:

By applying for this position, I hereby give my consent to Pro-Tec Fire Services of Canada, ULC, and its recruiters and managers, to:

- (a) Access and use the personal information contained in my application form and/or my resume, if submitted;
- (b) Contact the references named herein or in my resume, if submitted;
- (c) Access and use the information contained in my criminal record (if any) obtained as a result of the criminal record check for vulnerable sector;
- (d) Access and use the information in my Driver's Abstract;
- (e) In the event that I am offered a position, I agree to submit to a physical fitness exam, a medical examination, drug & alcohol test, and consent to Pro-Tec's access and use of the information obtained as a result, and to use any of the information collected as per above to assess my experience and suitability for the applied position.

I have read (or have had read to me), understand and agree to the above statement. (Please sign here) _____

Applicant's Signature: _____ Date: _____