



Firefighter Application Packet

Firefighter Hiring Process Disqualifiers

Missoula Rural Fire District

Any of the following may disqualify an applicant from further consideration during any stage of the hiring process, and in addition, may constitute grounds for termination of employment during the probationary period.

1. Having a conviction for, or currently charged with any felony offense or a misdemeanor theft or theft-related offenses.
2. Having a conviction for any offense constituting a felony under federal law.
3. Having a conviction for driving under the influence of alcohol or drugs within five (5) years preceding the date of application, or for having a history of 2 or more convictions for driving under the influence of alcohol or drugs in the past 10 years.
4. Currently being on probation for any felony offense.
5. Having a conviction for sex offenses, including indecent exposure.
6. Having a conviction for assault upon any person, Partner or Family Member Assault, or offenses constituting domestic abuse or assault under any law.
7. Having a conviction for illegal use of any controlled substance or dangerous drug including marijuana within five (5) years preceding the date of application.
8. Having any other conviction involving dangerous drugs, including but not limited to criminal possession, criminal distribution, criminal possession with intent to distribute, and fraudulently obtaining dangerous drugs.
9. Furnishing any controlled substance or dangerous drug to another.
10. Having a history of convictions for traffic violations involving negligence or recklessness. A person is deemed to have a history of convictions within the meaning of this paragraph when any one or more of the following are true:
 - a. During the three-year period immediately preceding the date of application, the person has been convicted of more than two moving violations.
 - b. During the three-year period immediately preceding the date of application, the person's driver's license has been suspended for driving under the influence of drugs or alcohol or for any other reason which Missoula Rural Fire District, in its sole discretion, determines is indicative of poor driving behavior or habits; or
 - c. During the three-year period immediately preceding the date of application, a person has had two or more collisions involving at least one motor-powered vehicle, whether or not citations were issued.
11. Being a member of any organization, which advocates or advocated for the overthrow of a United States governmental agency by force or violence.
12. Whether orally or in writing, purposely or knowingly making false statements, falsely swearing to statements, or falsifying testimony in any official matter.
13. Whether orally or in writing, purposely or knowingly making any false statement or misrepresentation by affirmative statement or omission regarding any information set forth or provided in any document listed on the Employment Application Checklist, background investigation form, or in any other aspect of the hiring process.
14. Failing to cooperate fully with Missoula Rural Fire District personnel involved in the hiring process, failing to provide additional information as requested, and failing to submit information updates/changes on or prior to stated deadlines.

For the purpose of the disqualifiers set forth in this document, a person has been convicted of an offense when the person has been found guilty of the offense, either by judge or by jury, in a court of competent jurisdiction, when the person entered a guilty plea or other plea, whereby the person did not challenge or contest the charges levied against him or her, such as an Alford plea or *nolo contendere*, or when any of the following situations are true:

- a. The person has served his or her sentence and has been discharged from probation,
- b. The person is granted a deferred imposition of sentence; and
- c. The person is found guilty of the offense and is thereafter pardoned, even if the pardon is expressly granted for subsequent proof of innocence.

A prior conviction, taken alone, will not necessarily disqualify the applicant.

The foregoing Disqualifiers shall be interpreted and construed at the sole discretion of the Missoula Rural Fire District Fire Chief or his or her designee(s) and said interpretation and construction shall be binding.

I have read and understand the contents of the Missoula Rural Fire District's **Firefighter Hiring Process Disqualifiers** form.

Applicant's Signature

Date

Applicant's Printed Name

Firefighter Application

Missoula Rural Fire District

2521 South Ave. W.

Missoula, Montana 59804

We welcome you as a Firefighter applicant. Your application will be considered with others in competition for the position in which you are interested. The Missoula Rural Fire District is an equal opportunity employer and will not discriminate on the basis of race, creed, religion, color, or national origin or because of age, physical or mental disability, marital status, or sex when the reasonable demands of the position do not require an age, physical or mental disability, marital status, or sex distinction. This policy applies to all phases of full, part-time, temporary, and seasonal employment. All information contained in or connected with this application will be considered personal and confidential and used only in conjunction with your possible employment by Missoula Rural Fire District. Please furnish us with complete information as outlined in this application. Please print in ink or type.

TODAY'S DATE:		
LAST NAME	FIRST NAME	MIDDLE INITIAL
HAVE YOU EVER WORKED OR ATTENDED SCHOOL UNDER ANY OTHER NAME(S)? IF YES, PLEASE PROVIDE THOSE NAMES:		
E-MAIL ADDRESS (PLEASE PRINT CLEARLY)		
MAILING ADDRESS	CITY, STATE	ZIP
HOME / CELL TELEPHONE NO.	WORK TELEPHONE NO.	
DO YOU HAVE A CURRENT COMMERCIAL DRIVER'S LICENSE?	____ Yes ____ No	
IF YES, PROVIDE THE LICENSE NUMBER: _____		
LIST ALL STATES WHERE YOU HAVE HELD A DRIVER'S LICENSE: _____		
LIST ALL STATES WHERE YOU HAVE HELD A COMMERCIAL DRIVER'S LICENSE: _____		
NAMES OF RELATIVES EMPLOYED BY MRFD		
DATE AVAILABLE FOR EMPLOYMENT: _____		
IF HIRED, CAN YOU FURNISH PROOF YOU ARE ELIGIBLE TO WORK IN THE UNITED STATES? ____ Yes ____ No		
ARE YOU 18 YEARS OF AGE OR OLDER? (If you are hired, you may be required to submit proof of your age)	____ Yes ____ No	
HAVE YOU EVER BEEN FIRED FROM A JOB? IF YES, PLEASE EXPLAIN. ATTACH EXTRA PAGES IF NECESSARY.	____ Yes ____ No	
HAVE YOU EVER BEEN ASKED TO RESIGN FROM A JOB? IF YES, PLEASE EXPLAIN. ATTACH EXTRA PAGES IF NECESSARY.	____ Yes ____ No	

HAVE YOU EVER BEEN CONVICTED OF ANY VIOLATION OF LAW AS STATED IN DISQUALIFIERS ABOVE?

____ Yes ____ No

(A "YES" answer does not automatically disqualify you from employment since the nature of the offense (date) and job for which you are applying is also considered.) IF YES, PROVIDE DETAILS:

HAVE YOU HAD YOUR DRIVER'S LICENSE SUSPENDED OR REVOKED IN THE PAST FIVE YEARS?

____ Yes ____ No

IF YES, PROVIDE DETAILS:

PLEASE PROVIDE **NAME, ADDRESS, AND PHONE NUMBER** OF 3 REFERENCES THAT ARE NOT RELATIVES OR FORMER EMPLOYERS:

1.

2.

3.

EDUCATION

EXPIRATION DATE OF STATE OF MONTANA- BOARD OF MEDICAL EXAMINERSEMT LICENSE: ____/____/____
 (if State of Montana license is in process, please indicate expected date of receipt: ____/____/____ and include copy of National Registry EMT certification or current out-of-state license.)

CIRCLE HIGHEST GRADE COMPLETED:																		
GRADE SCHOOL		HIGH SCHOOL		COLLEGE														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	1	2	MA/MSPHD
NAME/ADDRESS OF LAST HIGH SCHOOL					DID YOU GRADUATE?		HAVE YOU PASSED GED TEST?											
					YES NO		YES NO N/A											
TYPE OF SCHOOL	NAME/ADDRESS				DEGREE		MAJOR		MINOR									
TECHNICAL																		
COLLEGE/UNIV																		
GRADUATE																		

INSTRUCTIONS: List employers, beginning with your present and most recent employment. It is important to be complete. Any applicant rejected solely on the basis of references shall be allowed the opportunity for rebuttal. You are encouraged to submit a personal resume in addition to this application.

EMPLOYMENT HISTORY

EMPLOYER:	EMPLOYMENT DATES:
ADDRESS:	LAST SALARY:
	FULL TIME/PART TIME:
TELEPHONE:	REASON FOR LEAVING:
SUPERVISOR:	
JOB TITLE AND DUTIES PERFORMED:	

EMPLOYER:	EMPLOYMENT DATES:
ADDRESS:	LAST SALARY:
	FULL TIME/PART TIME:
TELEPHONE:	REASON FOR LEAVING:
SUPERVISOR:	
JOB TITLE AND DUTIES PERFORMED:	

EMPLOYER:	EMPLOYMENT DATES:
ADDRESS:	LAST SALARY:
	FULL TIME/PART TIME:
TELEPHONE:	REASON FOR LEAVING:
SUPERVISOR:	
JOB TITLE AND DUTIES PERFORMED:	

UNSALARIED EXPERIENCE

VOLUNTEER ORGANIZATION:	POSITION HELD:
ADDRESS:	DATES OF PARTICIPATION:
	HOURS PER WEEK:
TELEPHONE:	SKILLS LEARNED:
SUPERVISOR:	
JOB TITLE AND DUTIES PERFORMED:	

OTHER SKILLS OR EXPERIENCE

OTHER SKILLS OR EXPERIENCE WHICH RELATES TO THIS POSITION:
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Are you claiming veteran's preference for this position? Yes No

Do you require any accommodations for this position? Yes No

This application for employment will remain active for a limited time. Ask the organization representative for details.

EMPLOYMENT APPLICATION AFFIDAVIT - PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application, as well as in all documents submitted to Missoula Rural Fire District in making application for employment, is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal from employment if discovered after I am hired.

I authorize the investigation of any or all statements contained in this application and any other documents submitted in making application for employment. I also authorize any person, school, current employer, past employers, and organizations, whether listed or not, to provide relevant information and opinions that may be useful in making a hiring decision.

I release all persons and organizations from all liability for providing information pursuant to any background checks and investigations, as well as for any inquiry for a consumer report, and I waive any and all actions against Missoula Rural Fire District, any person, school, current employer, past employers, and organizations, whether listed or not, based on any statements made or references given during the investigation.

I understand that if Missoula Rural Fire District extends an offer of employment to me, it may be conditioned upon my successfully passing a complete pre-employment physical examination.

I understand I may be required to successfully pass drug screening examinations as a condition of employment. I hereby consent to a pre-employment drug screen and/or a post-employment drug screen as a condition of employment.

I understand I also may be required to successfully pass medical examinations and background checks, including a credit check, consumer report, and investigative consumer report, driving record checks, criminal background check, and verification of educational credentials as conditions of employment.

I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT, AND NEITHER DOES IT GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

I have read and understand all the foregoing statements, and by my signature, I represent that each of the foregoing statements is true and consent to be bound legally by these statements.

Applicant's Signature

Date

Applicant's Printed Name

CONSENT FOR MISSOULA RURAL FIRE DISTRICT TO OBTAIN AN INVESTIGATIVE CONSUMER REPORT

I consent to the District obtaining an investigative consumer report from a consumer reporting agency. I understand that the investigative consumer report may include information as to my character, reputation, personal characteristics, and mode of living obtained from interviews with neighbors, friends, former employers, schools, and others. I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation.

I release all persons and organizations from all liability for providing information pursuant to this investigation and inquiry for an investigative consumer report, and I waive any and all actions against the Missoula Rural Fire District, any person, school, current employer, past employers, and organizations, whether listed or not, based on any statements made or references given during the investigation.

I have read and understand all the foregoing statements.

Applicant's Signature

Date

Applicant's Printed Name

**BACKGROUND CHECKS POLICY ACKNOWLEDGMENT AND CONSENT TO CONDUCT BACKGROUND CHECKS
PRIOR TO EMPLOYMENT AND DURING THE COURSE OF EMPLOYMENT**

The position an individual applies for and the information he/she gives during the interview process will determine what contingencies may apply to an offer of employment. All employees applying for any position with Missoula Rural Fire District will be subject to reference checks with former employers and/or managers. Copies of any written material provided to Missoula Rural Fire District during the course of a reference check will be provided to the applicant pursuant to the applicant's written request. The application materials of any applicant not selected shall be maintained only for a limited time.

Individuals' claims to have certain educational credentials, either in writing or in an interview, are subject to verification.

Positions that have responsibility for initiating or affecting financial transactions will require a criminal background check and a credit check of any individual offered such a position. These responsibilities could include, among other things, collecting or handling cash or checks, writing checks or approving them, access to a direct money stream or as a fiduciary to the organization.

Any potential employee who will be driving a company vehicle or driving a personal vehicle on company business more than 5,000 miles each year will be subject to an inspection of his/her Motor Vehicle Record annually.

Depending upon the job requirements, some employees may have to comply with the Department of Transportation requirements for a Commercial Driver's License.

For positions that require employees to enter the homes of patients/clients/customers, the employee will be subject to a criminal background check.

Only individuals that are authorized to do so may initiate or receive criminal background information.

Information gained from any of the above background checks will be held in confidence and shared with management individuals that are authorized only on a need-to-know basis.

A criminal record is not an automatic ban to employment with the Missoula Rural Fire District.

Any offer of employment made to any applicant shall be contingent upon the results of any drug tests, medical examinations, and other background checks which Missoula Rural Fire District determines, in its sole discretion, are necessary for applicants for jobs in a particular job category.

I have read the foregoing policy, and I understand it. I consent to the Missoula Rural Fire District conducting any of the foregoing background checks which it deems, in its sole discretion, are necessary and appropriate to the job for which I am applying.

Applicant's Signature

Date

Applicant's Printed Name

Applicant Rights and Consent to Fingerprint

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification¹ by Missoula Rural Fire District that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.
- If you have a criminal history record, the officials making a determination of your suitability for employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record.²

You have the right to expect that officials receiving the results of the criminal history record check will use it only for a authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI at the same address as provided above. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency.

If a change, correction, or update needs to be made to a Montana criminal history record, or if you need additional information or assistance, please contact Montana Criminal Records and Identification Services at DOJCRISS@mt.gov or 406-444-3625.

Your signature below acknowledges this agency has informed you of your privacy rights for fingerprint-based background check requests used by the agency.

Signed:

Name	Date

¹ Written notification includes electronic notification but excludes oral notification.

² See 28 CFR 50.12(b).

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).

NCPA/VCA Applicants

To _____:
(Your Name)

You have applied for employment with, will be working in a volunteer position with, or will be providing vendor or contractor services to (write in Agency or Entity name) _____ Missoula Rural Fire District _____ for the position of (please be specific) _____.

The National Child Protection Act of 1993 (NCPA), Public Law (Pub. L.) 103-209, as amended by the Volunteers for Children Act(VCA), Pub. L. 105-251 (Sections 221 and 222 of Crime Identification Technology Act of 1998), codified at 42 United States Code (U.S.C.) Sections 5119a and 5119c, authorizes a state and national criminal history background check to determine the fitness of an employee, or volunteer, or a person with unsupervised access to children, the elderly, or individuals with disabilities.

1. Provide your name, address, and date of birth, as appears on a document made or issued by or under the authority of the United States Government, a State, political subdivision of a State, a foreign government, a political subdivision of a foreign government, an international governmental or an international quasi-governmental organization which, when completed with information concerning a particular individual, is of a type intended or commonly accepted for the purpose of identification of individuals. 18 U.S.C. §1028(D)(2).
2. Provide a certification that you (a) have not been convicted of a crime, (b) are not under indictment for a crime, or (c) have been convicted of a crime. If you are under indictment or have been convicted of a crime, you must describe the crime and the particulars of the conviction, if any.
3. Prior to the completion of the background check, the entity may choose to deny you unsupervised access to a person to whom the entity provides care.

The entity shall access and review State and Federal criminal history records and shall make reasonable efforts to make a determination whether you have been convicted of, or are under pending indictment for, a crime that bears upon your fitness and shall convey that determination to the qualified entity. The entity shall make reasonable efforts to respond to the inquiry within 15 business days.

Your Name: _____

First Middle Maiden Last

Date of Birth: _____

Address: _____

City State Zip

I have been convicted of, or am under pending indictment for, the following crimes [include the dates, location/jurisdiction, circumstances and outcome]:

I have not been convicted of, nor am I under pending indictment for, any crimes

I authorize Montana Department of Justice, Criminal Records and Identification Services Section to disseminate criminal history record information to _____.

Signature of Applicant

Date

CONFIDENTIAL EEO FILE INFORMATION

MISSOULA RURAL FIRE DISTRICT
EQUAL OPPORTUNITY EMPLOYER

It is the policy of this organization to provide equal employment opportunity to all qualified applicants for employment without regard to race, creed, color, religion, national origin, political ideas, marital status, sex, age, genetics, veteran status or disability. Various agencies of the government require employers to invite applicants to identify themselves as indicated below.

COMPLETION OF THIS FORM IS VOLUNTARY AND IN NO WAY AFFECTS THE DECISION REGARDING YOUR APPLICATION FOR EMPLOYMENT. THIS FORM IS CONFIDENTIAL AND WILL BE MAINTAINED SEPARATELY FROM YOUR APPLICATION FORM.

What prompted you to apply for this position? (check one)

Newspaper Ad Friend Employment Office
 Vo Tech Center Indian Center Other

Sex: Male Marital Status Single Birth Date: _____
 Female Married

Ethnic Background Black Alaskan Native White
 Asian American Native American Hispanic

Are you a citizen of the United States? Yes No

If not, have you filed a declaration of intent? Yes No

Are you a legal resident of Missoula County? Yes No

Have you ever been convicted of a felony? Yes No

If yes, state the nature of the crime: _____

When committed (Year) _____ When released (year) _____

Do you have any disabilities that would affect your job performance? Yes No

If yes, please explain: _____

Did you receive Workers' Compensation? Yes No

Are you a veteran? Yes No

Service dates: From _____ To _____

Are you disabled or handicapped? Yes No

This Space for Missoula Rural Fire District

Interviewed: Hired Not Hired

Reason _____

Not Interviewed

Reason _____



MISSOULA RURAL

FIRE DISTRICT

AUTHORIZATION TO RELEASE INFORMATION

To:

I am an applicant for a firefighter position with Missoula Rural Fire District. In this connection, I hereby authorize you to release any and all information which you may have concerning me, including information of a confidential or privileged nature. A copy of any written material you provide to the District shall be given to me upon my written request.

I hereby release Missoula Rural Fire District and any organization, company, institution, or person furnishing information to Missoula Rural Fire District or its representatives, as authorized above, from any liability and damages which may result from your furnishing to the Missoula Rural Fire District with the information requested.

A copy of this Authorization is considered to be as valid as the

original. Date: _____, 20_____

Applicant's
Signature

Print Applicant's Full Name: _____

Present Address: _____

S.S.N: _____