



ST. CHARLES FIRE DEPARTMENT

City of St. Charles

An Equal Opportunity Employer

2 E. Main Street

St. Charles, IL 60174

Phone: 630.377.4400

www.stcharlesil.gov

FIREFIGHTER/PARAMEDIC SUPPLEMENTAL APPLICATION

The City of St. Charles accepts for employment and promotes its employees without regard to perceived or actual race, color, religion, sex, national origin, sexual orientation, age, marital status, military status, order of protection status, physical or mental handicap unrelated to ability to perform the essential job functions or any other status or class protected by federal, state, or local law. The City of St. Charles bases its hiring practices and promotions on merit, experience, education and other qualifications applied to all applicants and in accordance with the principles of equal employment opportunity and as required by any other applicable federal, state, or local law. The City of St. Charles complies with the American with Disabilities Act (ADA). Persons needing accommodations in the recruitment process should notify the City of St. Charles Human Resources Department in advance.

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 the City of St. Charles. Please furnish us with complete information as outlined in this application.

See the “**Required Documents and Application Checklist**” on page 3 in this document for complete application instructions. Please furnish us with complete information as outlined in the online application and this supplemental application. For this document, please use a typewriter or print in black ink.

Read every question carefully and answer each question accurately. An applicant may be disqualified from further processing if he/she intentionally makes a false statement of a material fact, practices or attempts to practice any deception or fraud in his/her applications, or examination for appointment. Any false statements on this application will be considered sufficient cause for dismissal. Any misrepresentation on this application whether actual or by omission may disqualify you for consideration of employment by the City of St. Charles.

THIS FORM IS A PART OF THE EXAMINATION PROCESS AND MUST BE COMPLETED IN ITS ENTIRETY and ALL REQUIRED DOCUMENTS MUST BE SUBMITTED.

See the Minimum Qualifications.

You will not be considered for the position unless you meet these requirements.

Any questions concerning the employment process should be directed to the Human Resources Department, City of St. Charles, 2 E. Main Street, St. Charles, IL 60174; 630.377.4446.

Minimum Requirements and Qualifications

Applicants for Firefighter/Paramedic appointments must meet the following minimum qualifications and requirements at the time of application:

- United States citizen
- High school diploma or equivalent (GED)
- Valid driver's license
- Age 21 years of age at the time of application and under 35 years of age when the final eligibility list is posted (or as otherwise exempt from age limitation by statute)
- Certification as a Firefighter II/Basic from the Illinois Office of the State Fire Marshal as of May 3, 2019
- Licensure as an Emergency Medical Technician – Paramedic (EMT-P) through the Illinois Department of Public Health as of May 3, 2019
- Successful completion of the Candidate Physical Ability Test (CPAT) by June 22, 2019. Certification shall not be more than 1 year old as of May 3, 2019
- Must submit at time of application: a copy of the following, to the extent applicable: birth certificate; high school diploma or GED certificate; IL driver's license; State of Illinois Firefighter II/Basic certificate; Illinois Department of Public Health (IDPH) current Emergency Medical Technician – Paramedic (EMT-P) license; CPAT certification (or may present at orientation/written test); naval or military service board and discharge papers (DD-214/Copy 4).
- Ability to furnish upon request, a copy of the following, to the extent applicable: a resume; transcripts of higher learning; other professional licenses; training certificates; documents confirming work experience; employee evaluations; and any other employment related material as requested or required.

The following is a tentative schedule of the testing procedures:

- | | |
|----------------------|---|
| • April 2, 2019 | Applications available |
| • May 3, 2019 | Application deadline |
| • June 22, 2019 | Orientation and written examination |
| • July/August 2019 | Oral interviews |
| • August 23, 2019 | Posting of Initial Eligibility Register |
| • September 16, 2019 | Posting of Final Eligibility Register |

Dates are subject to change at the discretion of the Board of Fire and Police Commissioners. Applicants are required to be present for all components of the testing process. Successful completion of a background investigation is required. Post offer, successful completion of a psychological assessment, physical, functional capacity evaluation, and drug screen are required.

The City of St. Charles is an Equal Opportunity Employer.

REQUIRED DOCUMENTS & APPLICATION CHECKLIST

The following checklist will help ensure you submit all of the required application materials and documentation. The required documents may be uploaded into the on-line application on governmentjobs.com at the time of application submission **or** may be brought to the St. Charles Human Resources Department. This form should be submitted with the documentation.

- **Gather the required documentation. (please check those being submitted)**
 - Birth certificate
 - High School diploma or GED *College diploma not acceptable substitute
 - Driver's license
 - State of Illinois Firefighter II/Basic certificate
 - Illinois Department of Public Health (IDPH) current Emergency Medical Technician – Paramedic (EMT-P) license
 - CPAT Certification or may present at the orientation/written test date of 6/22/19
 - Military discharge (DD214/Copy4, if applicable)
 - Signed Disqualification Statement
 - Signed Acknowledgement and General Release of All Claims form
 - Signed Authorization to Release Information form
 - Completed Data Collection Form (optional)
 - This checklist with a signature

- **Complete the online employment application at <https://www.governmentjobs.com/careers/stcharlesil>**
 - Upload this supplemental application and the documentation into the online application before submittal. You cannot go back into the application to add documents once it has been submitted. Governmentjobs.com will require an account/applicant profile to certify and submit your application. Contact Human Resources with questions at 630-377-4446.
 - OR**
 - Complete the online application and bring this supplemental application and the required documentation in person to the St. Charles Human Resources Department, 2 E Main Street, St. Charles, IL 60174 (hours are M-F 8:00 a.m. to 4:30 p.m.).

Applicants submitting incorrect or insufficient proof or incomplete applications will be automatically disqualified from employment consideration.

Applications are considered complete when the on-line application has been submitted **AND** the required documents and forms have been either uploaded in the application or submitted in person to the Human Resources Department.

Application deadline is 3:00 p.m. Friday, May 3, 2019

Applicant name printed: _____ **Date:** _____

Applicant signature: _____ **Date:** _____

Internal Use Only

Date and Time Received: _____

HR Staff Initials: _____

SUPPLIMENTAL APPLICATION

Complete and return the following pages with the required forms and documents.

Name _____
Last First Middle

Address _____
Number & Street City State Zip

Home Phone Number () Cell Phone Number ()

Email address: _____

Are you a U.S. Citizen? YES ___ NO ___

Do you have a valid driver's license? YES ___ NO ___

Do you meet the minimum requirements for this position? YES ___ NO ___

EDUCATION

List any training, skills, professional licenses or certificates that you have that pertain to the position for which you are applying:

PERSONAL HISTORY AND CONVICTION INFORMATION (for background investigation purposes)

You are not obligated to disclose criminal history records that have been sealed, impounded, or expunged.

List all names or aliases you have used, or have been known by _____

Date of birth _____

Driver's license number _____ State _____ Expiration date _____

Have you ever had a driver's license in any other state? YES ___ NO ___ If YES, where? _____

Has your license ever been suspended or revoked, or have you ever been issued a judicial driving permit?
YES ___ NO ___

If YES, please explain _____

Have you ever been convicted of a felony or misdemeanor in any jurisdiction? YES ___ NO ___

If YES, provide the following information for all convictions:

Date of Offense	Jurisdiction	Type of Offense	Disposition of Case

Have you ever been placed on probation? YES ___ NO ___

If YES, explain: _____

Have you ever been the respondent or named in an order of protection in any state? YES ___ NO ___

If YES, explain: _____

Have you ever used marijuana or any other illegal drug? YES ___ NO ___

Have you ever been involved with the sale and/or distribution of illegal drugs? YES ___ NO ___

If the answer to either of these questions is YES, explain:

List all traffic convictions and accidents you have been involved in during the last seven (7) years:

Date of Incident	Jurisdiction	Type of Offense	Disposition of Case

LIST ALL ADDRESSES FOR THE PAST TEN (10) YEARS IN CHRONOLOGICAL ORDER

Address _____
Number & Street _____ City _____ State _____ Zip _____ Date range _____

Address _____
Number & Street _____ City _____ State _____ Zip _____ Date range _____

Address _____
Number & Street _____ City _____ State _____ Zip _____ Date range _____

Address _____
Number & Street _____ City _____ State _____ Zip _____ Date range _____

Address _____
Number & Street _____ City _____ State _____ Zip _____ Date Range _____

EMPLOYMENT HISTORY

Have you ever received formal discipline during your employment, such as written reprimands, suspension, etc.?
YES ___ NO ___

If "YES", please attach a separate sheet with explanation for each incident, including the employer's name and dates of occurrence.

Have you ever been discharged or forced to resign from any employment? YES ___ NO ___

If "YES", please attach a separate sheet with explanation for each incident, including the employer's name and date of occurrence.

Please review the job description. Are you able to perform the essential job functions listed therein with or without reasonable accommodation?
YES ___ NO ___

If accommodation is needed, please explain: _____

REFERENCES

Please list five (5) adults not related to you and not former employers, whom you have known for at least three (3) years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality and other qualities. The St. Charles Fire Department or its designee reserves the right to contact the references at any time.

Name _____ Relationship _____
Occupation _____ Number of years acquainted _____
Address _____
Home phone _____ Cell phone _____ Business phone _____
Email address _____

Name _____ Relationship _____
Occupation _____ Number of years acquainted _____
Address _____
Home phone _____ Cell phone _____ Business phone _____
Email address _____

Name _____ Relationship _____
Occupation _____ Number of years acquainted _____
Address _____
Home phone _____ Cell phone _____ Business phone _____
Email address _____

Name _____ Relationship _____
Occupation _____ Number of years acquainted _____
Address _____
Home phone _____ Cell phone _____ Business phone _____
Email address _____

Name _____ Relationship _____
Occupation _____ Number of years acquainted _____
Address _____
Home phone _____ Cell phone _____ Business phone _____
Email address _____

DISQUALIFICATION NOTICE

The Rules and Regulations of the St. Charles Board of Fire and Police Commissioners (BFPC) govern the testing and hiring processes. According to the Rules, the BFPC may refuse to examine or, after examination, refuse to certify as eligible, or refuse to hire, a candidate who:

- a. is found lacking in any of the established preliminary requirements for the service for which he or she applies;
- b. is physically unable to perform the essential duties of the position to which he or she seeks appointment with or without a reasonable accommodation;
- c. abuses alcohol ,drugs or illegal narcotics (including but not limited to any marijuana use within the last 3 years and/or narcotics use within the last 5 years);
- d. has been convicted of a felony or any crime involving moral turpitude; no firefighter or police officer candidate shall be disqualified for any misdemeanor convictions except those listed in 65 ILCS 5/10-2.1-6 of the BFPC Act;
- e. has been dismissed for disciplinary reasons from any public service for good cause;
- f. has been or attempted to be deceptive or fraudulent in his or her application;
- g. is lacking in personal qualifications, educational requirements, or health qualifications;
- h. has character and/or employment references that are unsatisfactory;
- i. has applied for a position of firefighter/paramedic or police officer and is or has been classified by his or her Local Selective Service Draft Board as a conscientious objector;
- j. has been previously disqualified as an eligible candidate by the BFPC from an existing St. Charles eligibility list; and/or
- k. has been previously disqualified for employment with the City of St. Charles due to the failure of a polygraph exam, or background investigation.

I, as a prospective candidate for a position with the City of St. Charles, have read and understood these standards for disqualification.

Print Name: _____

Applicant Signature: _____

Date: _____

ACKNOWLEDGMENT and GENERAL RELEASE OF ALL CLAIMS

Read the following carefully before signing.

I, the undersigned, certify that I have read and fully comprehend this application for employment in its entirety. I acknowledge that the information provided on this application for employment and other submitted application materials is true, complete, and correct to the best of my knowledge. I understand and agree that any incorrect statement, falsification, misrepresentation or omission of any information in connection with this application for employment / other submitted application materials, whenever or however discovered, may result in the rejection of my application for employment or termination of employment without notice or benefits.

In consideration of my participation in the employment process, I authorize an investigation by the St. Charles Police Department, the City of St. Charles or its officials, employees, appointees, contractors, agents or representatives – jointly termed “the Employer” - of my employment history, background and criminal history, credit history, education, military service, and activities. I authorize the Employer to request and receive such information. I authorize my current / former employers to furnish their records of my service, my reasons for leaving their employ, and all other information they may have concerning me, to the Employer. I understand that the Employer is not responsible for the accuracy or completeness of the information contained in any reports. I agree to cooperate in such an investigation. I hereby fully release and discharge the Employer, its successors, heirs, executors, administrators and assigns, from all rights, claims, and damages, whether to person or property, whether known, unknown, foreseen or unforeseen, and all actions of any type whatsoever, which I may have against the Employer arising out of my participation in the employment process. This release is intended to release all claims for injuries, damages, or loss of any kind whatsoever to me, my persons or property, real or personal, whether known, unknown, foreseen, or unforeseen which I may have against the Employer. I understand and acknowledge the significance and consequences of such specific intention to release all claims and do hereby assume full responsibility for any and all expenses, liabilities, injuries, damages, and/or losses that may incur from participating in the employment process.

I understand that all tests, assessments, and results thereof become the property of the St. Charles Board of Fire and Police Commissioners and are not subject to review.

I understand that submission of an application for employment does not obligate the Employer to engage in further review of my application for employment. I understand that this document does not constitute an offer of employment or employment contract and establishes no obligation on the part of the Employer to employ me.

Print Name: _____

Applicant Signature: _____

Date: _____

In signing this document, I understand that I am releasing or giving up certain potential legal rights. I further acknowledge that I have fully read this document and am fully aware of the consequences thereof. Being so informed, I knowingly and voluntarily execute this release.

Printed Name _____

Signature _____

Date _____

AUTHORIZATION TO RELEASE INFORMATION

Date _____

TO WHOM IT MAY CONCERN:

I hereby authorize a comprehensive investigation into my background, including, but not limited to, all statements contained in this application and any other document(s) submitted in connection therewith, and permit the Board of Fire and Police Commissioners, St. Charles Fire Department, St. Charles Police Department, the City of St. Charles or its officials, employees, appointees, contractors, agents or representatives – jointly termed “the Employer” - to obtain and use all information relating to my previous and current employment, education, military record, credit record, criminal conviction history, personal characteristics and all other information which may bear favorably or unfavorably upon my application for employment made to the St. Charles Fire Department.

I also authorize my previous employers, the educational institutions I attended, any other organizations and individuals to disclose information about me on the subjects covered by this application form or related documents to the Employer. Any individual, educational institution, organization or business entity is hereby released from any and all liability for any damages, which may arise as a result of providing such information. I also agree to release the Employer, from any and all liability arising from the use of the information obtained through the investigation of my background and any action taken based on such information.

As part of the procedure for processing my employment application, an investigative inquiry may be made into my background, which will concern my character and general reputation. Under the Fair Credit Reporting Act, I am entitled, upon my written request, to receive information as to the nature and scope of the investigation.

I also consent to the release to the Employer of any and all medical records prepared during the physical examination I am required to undergo for employment with the St. Charles Fire Department.

If I have had any questions concerning the application process, I have contacted the Board of Fire and Police Commissioners and discussed those questions with the Commissioners to my satisfaction.

A duplicate of this form shall carry the same force as the original. This document is effective for two years from date indicated above.

Printed Name: _____

Applicant Signature: _____

Street Address, City, State, Zip: _____

If you have any questions, please contact: Joe Schelstreet
Fire Chief
630.377.4458



ST. CHARLES
INCORPORATED 1834
2 E. Main Street
St. Charles, IL 60174
630.377.4400

The City of St. Charles collects the following information to evaluate its recruitment practices. Disclosure of information is on a voluntary basis. The information disclosed is confidential and will be maintained separate from your employment application. Submission or non-submission of this form shall not be used as a factor concerning eligibility for employment.

Position applied for: FIREFIGHTER/PARAMEDIC

Recruitment Date: APRIL - MAY 2019

Name _____

Gender Male Female

Race

- American Indian / Native Alaskan
 - Asian
 - Black
 - Hispanic
 - Native Hawaiian / other Pacific Islander
 - Two or more races
 - White
 - Other
-

How did you learn of this opportunity?

- Website posting – please indicate which one _____
- Newspaper ad – please indicate which one _____
- Informed by a current City of St. Charles employee
- Informed by a friend / relative
- Church / other religious institution – please indicate which one _____
- Community agency / organization – please indicate which one _____
- School / college posting – please indicate which one _____
- Other – please indicate which one _____