



*Mission Statement*

*Flint Township Fire Department is dedicated to promoting safety, saving lives and fighting fires. We accomplish this by being caring, committed and courageous while serving with integrity and honor.*

**FULLTIME FIRE FIGHTER  
CHARTER TOWNSHIP OF FLINT  
Civil Service Commission  
2015**



## **ENTRY LEVEL FULLTIME FIRE FIGHTER CHARTER TOWNSHIP OF FLINT**

### **FULLTIME FIRE FIGHTER POSITION INFORMATION**

The Charter Township of Flint Fire Department is a combination department made up of 9 fulltime sworn officers, 20 on-call fire fighters and 1 administrative assistant. The department has three stations, 6 engines and 1 support vehicle. The department serves a community of 33,691 residents and a large commercial/retail district conducting fire inspections and responding to over 800 alarms a year. The department anticipates filling (3) three open fulltime fire fighter positions, anticipating additional openings in the next two years with retirements.

Specific inquiries about the position can be made to Assistant Chief Michael Burkley 810- 600-3206.

**NOTICE** is hereby given that the Charter Township of Flint Civil Service Commission will be conducting a Civil Service Examination for the position of Entry Level Fulltime Fire Fighter.

### **ALL APPLICANTS MUST MEET THE FOLLOWING QUALIFICATIONS:**

- I. Citizen of the United States.
2. Attain the age of majority.
3. Possess a valid Michigan Driver License.
4. Have a cell phone.
5. Have e-mail account
6. Prefer to live in Township or in Genesee County.
7. Possess knowledge of computers and Windows base computer software (i.e. Word, power point)

8. The applicant must have Michigan Fire Fighter Training Council certification in Fire Fighter II, Fire Officer 1, Hazmat Operation, and Driver Training; and must have a CPR card; and must be an active fire fighter with an organized fire department for no less than five (5) years. Other preferred training degrees/licenses: an Associate Degree or Bachelor's Degree from a fully accredited College or University, Fire Officer 3, Michigan EMT or higher, current Michigan Fire Fighter Training Council Fire Instructor and Michigan Hazmat Technician, CPR instructor, Licensed Heavy Truck mechanic.

9. Must possess the Health, Fitness, Physical and Psychological capacity required to perform as a Fire Fighter.

10. Must file a Flint Township Civil Service Commission Application available at the Flint Township Clerk's Office, 1490 S. Dye Road, Flint, MI 48532 (810) 732-1350 for Entry Level Fulltime Fire Fighter along with written proof, of the Education requirements above during regular business hours, Monday - Thursday 8:00 a.m. to 5:30 p.m. The original and a copy of education proof must be brought in at time of turning in application. Applications are also available at [www.flinttownship.org](http://www.flinttownship.org).

11. Applications must be returned to the office of the Flint Township Clerk no later than 5:30pm, on **Tuesday, September 1, 2015**. All qualified applicants will be notified by First Class mail at the address provided on their application form of the date, time and place for the written portion of the examination.

**CHARTER TOWNSHIP OF FLINT  
CIVIL SERVICE APPLICATION FOR EMPLOYMENT**  
POSITION APPLIED FOR: \_\_\_\_\_

Social Security Number	Name (Last) (First) (Middle)				
Area Code/Phone No.	Street Address			Apt. No.	
Birth Date	U.S. Citizen Yes    No	City	State	Zip Code	County

**CERTIFICATION/SIGNATURE:** Complete application and read carefully before signing.

I certify that all the information contained in this application is true and complete and I agree and understand that any falsification of material facts will result in my forfeiting any rights to consideration for employment in the classified service in the State of Michigan.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<p><b>OCCUPATIONAL LICENSES, REGISTRATION, CERTIFICATES:</b></p> <p>Name _____ of _____ License: _____          License _____ No: _____          Name _____ of _____ License: _____          License _____ No: _____          Driver's License Number: _____</p>	<p><b>LANGUAGE:</b> List languages other than English which you can speak, read, or write fluently.</p> <p>1. _____          2. _____          3. _____</p>
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**EDUCATION:** Your Transcript is needed, you must furnish us with a copy.

College or University	Degree	Date Granted	Total Credit Hours	Major and Numbers of Credit Hours
Business or Trade School	Subject	Degree, diploma, or certificate	Date Granted	
High School	Diploma or Certificate	Date Granted		
Special Training or Course	Degree or Certificate	Date Granted		





Employer:		Working Title of Job		
Street Address		Civil Service Title of Job (if known)		
Dates of Employment: (mm/dd/yr) From: _____ To: _____		<input type="radio"/> Full Time <input type="radio"/> Part Time	Average Hours Per Week	
Total Months in Job:	Civil Service Use ONLY			
	Type	Months	Last Year	Modifier
Description of your duties:				

Employer:		Working Title of Job		
Street Address		Civil Service Title of Job (if known)		
Dates of Employment: (mm/dd/yr) From: _____ To: _____		<input type="radio"/> Full Time <input type="radio"/> Part Time	Average Hours Per Week	
Total Months in Job:	Civil Service Use ONLY			
	Type	Months	Last Year	Modifier
Description of your duties:				

Employer:		Working Title of Job		
Street Address		Civil Service Title of Job (if known)		
Dates of Employment: (mm/dd/yr)		<input type="radio"/> Full Time <input type="radio"/> Part Time		Average Hours Per Week
From: _____ To: _____				
Total Months in Job:	Civil Service Use ONLY			
	Type	Months	Last Year	Modifier
Description of your duties:				

Employer:		Working Title of Job		
Street Address		Civil Service Title of Job (if known)		
Dates of Employment: (mm/dd/yr)		<input type="radio"/> Full Time <input type="radio"/> Part Time		Average Hours Per Week
From: _____ To: _____				
Total Months in Job:	Civil Service Use ONLY			
	Type	Months	Last Year	Modifier
Description of your duties:				

**PREVIOUS RESIDENCE:** Please list all previous addresses that you have resided at for the last three years.  
If necessary, add additional sheets.

Street Address:		Apt. No.
City:	State:	Zip Code:

Street Address:		Apt. No.
City:	State:	Zip Code:

Street Address:		Apt. No.
City:	State:	Zip Code:

Street Address:		Apt. No.
City:	State:	Zip Code:

List <b>ALL</b> arrests and traffic tickets (except parking tickets)

List all organizations that you belong to:

<b>The attached "AUTHORIZATION TO RELEASE ENFORMATION" form must be signed, dated, and notarized. The form must be attached with the application</b>	
Please Note: If your application is incomplete, it will not be processed. Did you sign the application? Did you include your social security Number? Did you review your application?	<b>Civil Service Use ONLY</b>



Did you make a copy for your records?  
Did you include a copy of your transcripts?

## CIVIL SERVICE COMMISSION AUTHORIZATION TO RELEASE INFORMATION

To: Whom it may concern,

I, \_\_\_\_\_, have applied for a position with the Flint Township Fire Department through the Flint Township Civil Service Commission. The Flint Township Civil Service Commission and the Flint Township Fire Department is authorized to conduct a personal background investigation.

I hereby authorize the Flint Township Civil Service Commission, it's designee or agent, to investigate any and all of my past and current activities, as well as to receive full and complete disclosure of all records relating to me, including, but not limited to, records of education institutions, hospitals, clinics, medical practitioners, the U.S. Military or Veterans Administration, public utility companies, employment or pre-employment records, background reports, employment evaluations, complaints or grievances filed by or against me, salary, polygraph examination reports, criminal or traffic reports or arrest reports or investigations, complaints or grievances filed by or against me whether criminal or civil, to include records and recollections of attorneys at law, or other counsel.

It is my intent, through the execution of this document, to allow the Flint Township Civil Service Commission, its agent or designee, full, complete, and unfettered access to any and all information relating to my life, whether personal or private, and whether or not confidential or otherwise protected by law, rule, regulation, policy or procedure.

I understand that the Flint Township Civil Service Commission will use any information, which is obtained as a result of or due to this authorization, to evaluate my suitability for employment.

**I HAVE FULLY READ AND UNDERSTAND THIS AUTHORIZATION FOR RELEASE.**

A PHOTOCOPY OF THIS SIGNED RELEASE OF INFORMATION FORM SHALL BE DEEMED VALID.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

SWORN TO AND SUBSCRIBED before me and personally known to me or provided identification (type provided) \_\_\_\_\_

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

NOTARY PUBLIC, State of \_\_\_\_\_

Name of Notary typed or printed: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_



## **FIRE APPLICANT REQUIRED DOCUMENTS Check Off List**

***Instructions:***

**Use this form to verify that all the required documents listed below are included with the application. Incomplete applications will NOT be accepted.**

**Do not include non-requested documents or certificates.**

- Completed Application**
- Copies of State of Michigan Firefighter 2 Certificate**
- Hazardous Material Operations Certificate**
- Current CPR/AED**
- High School and College transcripts (copies)**
- Valid State of Michigan Driver's License (copy)**
- Proof of Citizenship, birth (copy)**
- Social Security Card (copy)**
- Other Preferred training, degrees or licenses**

*(Completed Check List, sign it and submit with Application)*

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**Flint Township Fire Department**  
5331 Reuben Street  
Flint, Michigan 48532  
Flinttownship.org  
Office hours: Monday-Friday 8 am – 4:30 pm  
810-732-4413