



**DOUGLAS
OKANOGAN
FIRE DISTRICT 15**

Volunteer Packet
NEIGHBORS HELPING NEIGHBORS!

DOUGLAS OKANOGAN FIRE DISTRICT 15

BREWSTER, PATEROS, METHOW & ROCKY BUTTE

Thank you for your interest in becoming a Douglas Okanogan Fire District 15 Volunteer Emergency Responder.

Douglas Okanogan Fire District 15 is seeking the volunteer talents of hard working customer service minded men and women from our community to provide a wide range of emergency services that include fire suppression (structural, wild land, vehicle); vehicle extrication, special rescue, medical aid, hazardous materials response, fire prevention and public education activities. All these services are provided to the greater Brewster, Pateros, Methow and Bridgeport Bar area.

Our application process is multi-phased, consisting of a written application, criminal & driver record background check, physician's wellness screening, and oral interview with the Fire Chief.

Upon successful completion all phases of the application process, you will start your Volunteer Firefighter training. Training will be provided in the evening and on some weekends.

Following the completion of your volunteer application process, new members will be invited to join and attend regular drills with the rest of the membership. Regular evening drills are held Thursday evenings at the respective fire station. New Volunteer Firefighters will be asked to successfully complete a Volunteer Firefighter Training Academy. Radio pagers will then be issued allowing the new volunteer to start responding to emergency alarms with the rest of our professional emergency responders.

Please read the application carefully and attach all requested information. Return the completed application to Douglas Okanogan Fire District 15, Box 490, Brewster, Wa 98812 or to the individual station you are applying for: Brewster, Pateros, Methow or Rocky Butte

Again, thank you for your interest we look forward to meeting you and having you join our emergency response team. Should you have any questions, please contact Douglas Okanogan Fire District 15 at (509) 689-0216.

Sincerely,

William E. Vallance

William E. Vallance
District Fire Chief

DOUGLAS OKANOGAN FIRE DISTRICT 15

BREWSTER, PATEROS, METHOW & ROCKY BUTTE

VOLUNTEER EMERGENCY RESPONDER APPLICATION

Please read all instructions carefully. Fill in all forms completely and legibly.
Failure to provide all information requested may delay the application process.
All information provided will be held in the strictest of confidence.

POSITION APPLYING FOR	
<input type="checkbox"/> VOLUNTEER FIREFIGHTER <input type="checkbox"/> SUPPORT SERVICES	OTHER (SPECIFY)

PERSONAL INFORMATION	
NAME (LAST, FIRST, MI)	DOB
ADDRESS	SSN
CITY, STATE, ZIP	PHONE

ADDITIONAL INFORMATION	
WORK PHONE	EMAIL ADDRESS
PAGER	CELL PHONE

EMERGENCY CONTACT	
NAME	RELATIONSHIP
ADDRESS	PHONE

WASHINGTON STATE DRIVER'S LICENSE	
NUMBER	EXPIRATION
ENDORSEMENTS	RESTRICTIONS

PREVIOUS FIRFIGHTING OR EMERGENCY MEDICAL SERVICES EXPERIENCE	
HAVE YOU EVER BEEN AN APPLICANT, MEMBER OR EMPLOYEE OF THE DOUGLAS OKANOGAN FIRE DISTRICT 15 OR ANY OTHER FIRE/EMS AGENCY? YES NO <input type="checkbox"/> <input type="checkbox"/> 	
If yes, please attach information on an additional page.	

DOUGLAS OKANOGAN FIRE DISTRICT 15

BREWSTER, PATEROS, METHOW & ROCKY BUTTE

ARMED FORCES EXPERIENCE	
BRANCH	RANK
TYPE OF DISCHARGE	SERVICE DATES

SPECIAL ACCOMODATION
DO YOU HAVE ANY PHYSICAL, SENSORY OR MENTAL LIMITATIONS WHICH WOULD PREVENT YOU FROM PERFORMING THE FUNCTIONS OF A VOLUNTEER FIREFIGHTER? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, PLEASE EXPLAIN

CRIMINAL RECORD
DURING THE PAST SEVEN YEARS HAVE YOU BEEN CONVICTED OF ANY CRIME? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, ATTACH DETAILED INFORMATION AND DISPOSITION OF CASE.

EDUCATION	
ARE YOU A HIGH SCHOOL GRADUATE? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, YEAR, SCHOOL AND LOCATION:
IF NO, CIRCLE HIGHEST GRAD COMPLETED 10 11 12	GED COMPLETED? YEAR & LOCATION:

ENTER ANY COLLEGES, UNIVERSITIES OR TECHNICAL SCHOOLS ATTENDED. <small>(USE EXTRA PAGE, IF NECESSRY)</small>				
NAME OF SCHOOL	CITY /STATE	DATES ATTENDED	MAJOR	DEGREE

DOUGLAS OKANOGAN FIRE DISTRICT 15

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PREVIOUS TRAINING

ENTER BELOW ALL FIREFIGHTER, EMS OR OTHER APPLICABLE TRAINING.
(USE EXTRA PAGE, IF NECESSRY)

TYPE OF CERTIFICATION
JURISDICTION IN WHICH RECEIVED

DATE RECEIVED

EXPIRATION

ATTACHMENTS

PLEASE ATTACH TO THE BACK OF THIS APPLICATION
PHOTOCOPIES OF THE FOLLOWING:

- YOUR DRIVERS LICENSE
- YOUR SOCIAL SECURITY CARD
- ANY CERTIFICATION CARDS OR CERTIFICATES
- ANY OTHER REQUESTED INFORMATION

REFERENCES :

PLEASE PROVIDE AT LEAST 3 PERSONAL REFERENCES

THE CHELAN FIRE AND RESCUE WILL CONTACT EACH OF THESE REFERANCES BY TELEPHONE. THESE PERSONS SHOULD NOT BE RELATED TO YOU, BUT SHOULD BE ABLE TO COMMENT ON YOUR EDUCATION, WORK EXPERIENCE, CHARACTER, AND/OR COMMUNITY SERVICE INVOLVEMENT.

NAME

TELEPHONE NUNBER

OCCUPATION/TITLE

DOUGLAS OKANOGAN FIRE DISTRICT 15

BREWSTER, PATEROS, METHOW & ROCKY BUTTE

I (name): _____ HEREBY CERTIFY That all the information provided on this application is truthful and accurate to the best of my knowledge and ability.

I understand that each statement will be investigated. Any inaccurate, falsified or misleading statements or answers may result in rejection of this application or dismissal from the department.

I Authorize Douglas Okanogan Fire District 15's representatives to contact by telephone, in writing or in person the persons listed as references on this application and to confidentially gather and maintain their evaluations of me with respect to my character and fitness for the position for which I am applying.

In consideration for being considered for membership with Douglas Okanogan Fire District 15, I waive access to such reference forms/memos/letters/information in order for Douglas Okanogan Fire District 15 to conduct an evaluation of myself to ensure and provide for the protection and interest of the community. I release the references contacted and Douglas Okanogan Fire District 15 and its agents from any and all claims arising out of or relating to the reference information obtained or the characterization of the same however it may be recorded.

SIGNATURE _____ **DATE** _____

DOUGLAS OKANOGAN FIRE DISTRICT 15

BREWSTER, PATEROS, METHOW & ROCKY BUTTE

REQUEST FOR CRIMINAL HISTORY INFORMATION
CHILD/ADULT ABUSE INFORMATION ACT
RCW 43.43.830 THROUGH 43.43.845

INFORMATION REQUEST RELEASE FORM FOR:

APPLICANT'S NAME _____

LAST

FIRST

MIDDLE

ALIAS/MAIDEN NAME: _____

DATE OF BIRTH: _____ SEX: _____ RACE: _____

SOCIAL SECURITY: _____ DRIVER'S LICENSE# _____ STATE _____

SECONDARY DISEMINATION OF THIS CRIMINAL HISTORY RECORD INFORMATION RESPONSE IS PROHIBITED UNLESS IN COMPLIANCE WITH RCW 10.97.050.

CRIMES AGAINST PERSONS: ENDANGERMENT, COERCION, RAPE, RAPE OF A CHILD, ROBBERY; FIRST DEGREE ARSON, FIRST DEGREE BURGLARY, RESIDENTIAL BURGLARY; MANSLAUGHTER; EXTORTION; INDECENT LIBERTIES; INCEST; VEHICULAR HOMICIDE; VEHICULAR ASSAULT; PROMOTING PROSTITUTION; COMMUNICATION WITH A MINOR FOR UNLAWFUL PURPOSES; UNLAWFUL IMPRISONMENT MURDER; KIDNAPPING; ASSAULT; ASSAULT OF A CHILD; CUSTODIAL ASSAULT; HARASSMENT; STALKING, RECKLESS, SEXUAL EXPLOITATION OF MINORS; CRIMINAL MISTREATMENT; CHILD ABUSE OR NEGLECT AS DEFINED IN RCW 26.44.020; CUSTODIAL INTERFERENCE; CHILD MOLESTATION; SEXUAL MISCONDUCT WITH A MINOR; PATRONIZING A JUVENILE PROSTITUTE ; CHILD ABANDONMENT; PROMOTING PORNOGRAPHY; SELLING OR DISTRIBUTING EROTIC MATERIAL TO A MINOR; VIOLATION OF CHILD ABUSE RESTRAINING ORDER; CHILD BUYING OR SELLING; PROSTITUTION; FELONY INDECENT EXPOSURE; ETC.

CRIMES AGAINST PROPERTY: THEFT OF MONEY; AUTO THEFT; FRAUD; PERJURY; SECOND DEGREE BURGLARY; VEHICLE PROWLING; POSSESSION OF STOLEN PROPERTY; CRIMINAL TRESPASS; ARSON; ETC.

DRUG-RELATED CRIMES: CRIMES RELATING TO DRUGS' MEAN A CONVICTION OF A CRIME TO MANUFACTURE, DELIVER, OR POSSESSION WITH INTENT TO MANUFACTURE OR DELIVER A CONTROLLED SUBSTANCE.

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT.

SIGNATURE OF APPLICANT _____ DATE _____

-----APPLICANT DO NOT WRITE BELOW THIS LINE-----

I CERTIFY THIS REQUEST IS MADE PURSUANT TO AND FOR THE PURPOSE OF OBTAINING INFORMATION ALLOWED TO EMPLOYERS BY THE ABOVE CITED RCW AND THAT THIS INFORMATION WILL BE USED ONLY FOR MAKING THE DECISION TO HIRE OR ALLOW THE APPLICANT TO ACT AS A DOUGLAS OKANOGAN COUNTY FIRE DISTRICT 15 VOLUNTEER, AND FOR NO OTHER PURPOSE. IF THE INFORMATION SUPPLIED BELOW IS INSUFFICIENT TO CONFIRM APPLICANT IDENTITY, APPLICANT'S WILL BE SUPPLIED ANOTHER RELEASE FORM FOR A MORE DETAILED RECORDS CHECK.

William E. Vallance, District Fire Chief

DOUGLAS OKANOGAN FIRE DISTRICT 15

BREWSTER, PATEROS, METHOW & ROCKY BUTTE

VOLUNTEER APPLICATION DISCLOSURE STATEMENT

I UNDERSTAND THAT MY VOLUNTEER POSITION WITH DOUGLAS OKANOGAN FIRE DISTRICT 15 IS CONTINGENT UPON DOUGLAS OKANOGAN FIRE DISTRICT 15'S REVIEW AND APPROVAL OF A TRUTHFULLY COMPLETED AND SIGNED APPLICATION/DISCLOSURE STATEMENT AND RECEIPT OF A REPORT DECLARING NO EVIDENCE OF CRIMINAL HISTORY FROM THE WASHINGTON STATE PATROL OR OTHER POLICE AGENCIES. I FURTHER UNDERSTAND THAT IF I AM HIRED OR PERMITTED TO VOLUNTEER, I MAY BE DISCHARGED FOR ANY MISREPRESENTATION OR OMISSION ON THE APPLICATION/DISCLOSURE STATEMENT OR THE REQUEST FOR CRIMINAL HISTORY.

NAME _____
LAST FIRST MIDDLE

ADDRESS _____
(STREET) (CITY) (STATE) (ZIP)

Signature / /
Date

DOUGLAS OKANOGAN FIRE DISTRICT 15

BREWSTER, PATEROS, METHOW & ROCKY BUTTE

DOUGLAS OKANOGAN FIRE DISTRICT 15 IS AN EQUAL OPPORTUNITY EMPLOYER THAT DOES NOT DISCRIMINATE ON THE BASIS OF RACE, CREED, COLOR, MARITAL STATUS OR GENDER.

THE FIVE STEPS OF THE APPLICATION PROCESS:

FIRST STEP:

- ✓ Complete the application and attached forms.
- ✓ Return application and copies or required information to the administrative office.

SECOND STEP:

- ✓ Upon submission of the application a driver record and criminal history check will be executed.
- ✓ The Fire Chief will review the driver record and criminal history check occurrences.
- ✓ An interview with the applicant will be scheduled with the Fire Chief.

THIRD STEP:

- ✓ Upon approval from the Fire Chief of the above reviews.
- ✓ Applicant will be asked to fill out W4 and I9, including proper documentations for each. (Driver's Lic.; Social Security Card)

FORTH STEP:

- ✓ Upon approval and review by the District Fire Chief. Applicants will be submitted to the Board of Fire Commissioners for final acceptance into the fire department.

FIFTH STEP:

- ✓ The fire district will register the volunteer with Board for Volunteer Firefighter Disability and Pension.
- ✓ The fire district will issue appropriate protective gear and equipment.
- ✓ The fire district will provide access to the District Policy and Procedure.
- ✓ The volunteer will start his/her recruit.
- ✓ The volunteer will complete a six month probation period

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VOLUNTEER APPLICATION PROCESS (official use only)		
	DATE	PASS/FAIL
APPLICATION RECEIVED:		SIGNATURE
STATION APPLING FOR:		
BACKGROUND CHECK:		SIGNATURE
DRIVER'S HISTORY:		SIGNATURE
ORAL INTERVIEW:		SIGNATURE
PHYSICAL AGILITY TEST:		SIGNATURE
FIRE CHIEF APPROVAL:		SIGNATURE
BOARD APPROVAL:		SIGNATURE

DOCFD15 REPRESENTATIVE - PLEASE DISIGNATE PASS OR FAIL IN SPECIFIC AREA AND SIGN FOR YOUR APPROVAL

OFFICIAL START DATE: _____