

# Firefighter Part Time Assigned Shifts

**Submit Copy of Drivers Licenses**  
**&**  
**High School Diploma (or equivalent) or**  
**Higher**  
**With Application**

**Open Until Filled**

**Application Package**

**White County**



**Open Until Filled**

**Contains:**

- **Application for Employment \***
- **Background Investigation Consent Form \***
- **Medical Affidavits – 2 pages \***
- **Job Description**

***\*Complete Entirely and Return to Human Resources***

White County Government  
1235 Helen Hwy  
Cleveland, Georgia 30528

Telephone: (706) 865-2235  
Fax: (706) 865-1324

Internet Address: [www.whitecounty.net](http://www.whitecounty.net)

# APPLICATION FOR EMPLOYMENT

Position or Job Title Applied For: \_\_\_\_\_

• Human Resources Department, White County Administrative Building, 1235 Helen Hwy Cleveland, Georgia •

We consider applicants for all positions without regard to race, color, sex, religion, national origin, age, marital or veteran status, the presence of a disability or any other legally protected status.

## Personal Data

Last Name First (given) Middle Other name(s) under which you have been employed

Address: Street Apt # City State Zip Code

E-mail Address

Telephone: \_\_\_\_\_

Cell Residence Social Security Number

WILL YOU ACCEPT: Temporary Work?  Part-Time Work?  Shift Work?  Weekend/Holiday?

What is the minimum salary you will accept for this position? \_\_\_\_\_

Are you 18 years old or older? \_\_\_\_\_ Are you eligible to work in the United States either because you are a U. S. citizen or have U.S. government permission to do so?  No  Yes

NOTE: If offered employment you will be required to provide documentation to verify employment eligibility. Failure to provide the requested documentation may result in a determination that the applicant is ineligible for employment in the United States.

Have you ever worked for us before?  No  Yes If yes, when and where? \_\_\_\_\_

Give name, relationship, & department of any relatives currently employed with White County Government \_\_\_\_\_

Are you able to perform the job duties listed for the position *you* are applying for without an accommodation?

Yes  No If no, what accommodation is needed? \_\_\_\_\_

If required by this position, do you have a valid driver's license?  No  Yes

License # \_\_\_\_\_ Type \_\_\_\_\_ State \_\_\_\_\_

Have you had any traffic violations in the past 3 years?  No  Yes If yes, type of offense and dates: \_\_\_\_\_

Have you ever been convicted of an offense against the law or are you now under charges for any offense against the law? (Omit non-moving traffic violations and any offense which was finally adjudicated in a Juvenile Court or under a Youth Offender Law).

NO  Yes If Yes, give complete details: (Date, Place, Charges, Disposition) \_\_\_\_\_

NOTE: A conviction will not necessarily bar you from employment. Each conviction will be judged on its own merits with respect to time, circumstances and seriousness.

*"We are an Equal Opportunity Employer"*

**EDUCATION**

Do you have a high school diploma or its equivalent (G.E.D./USAFI Certificate)?  NO  YES

If yes, please list the name and address of the high school or state authority issuing the diploma or certificate.

Please complete the following section for post-secondary education (Technical Schools/Colleges/Universities):

Name of School	City	State	Hours		Major	Degree	Date Received
			Quarter	Semester			

Describe any specialized training, apprenticeship, skills, and extra-curricular activities. Include office equipment, computer skills, foreign language skills, and special honors that may relate to the position for which you are applying.

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**REFERENCES** - Give names, addresses, and telephone numbers of three (3) references who are not related to you and are not previous employers.

1. \_\_\_\_\_  
 Name Phone #

Address: Street Apt # City State Zip Code

2. \_\_\_\_\_  
 Name Phone #

Address: Street Apt # City State Zip Code

3. \_\_\_\_\_  
 Name Phone #

Address: Street Apt # City State Zip Code

## Work History

Describe your work history **beginning with your current or most recent job**. Include military and volunteer experience. Failure to give complete information regarding each job held may result in your disqualification. Complete addresses with zip codes and telephone numbers for all employers are necessary. Have you ever been disciplined, fired, or asked to resign from any job?  No  Yes If yes, why? \_\_\_\_\_

\*\*\*\*\*

Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Employment Dates:

\_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Annual Salary: \_\_\_\_\_

Position Held: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Describe Your Duties: \_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*

Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Employment Dates:

\_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Annual Salary: \_\_\_\_\_

Position Held: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Describe Your Duties: \_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*

Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Employment Dates:

\_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Annual Salary: \_\_\_\_\_

Position Held: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Describe Your Duties: \_\_\_\_\_

\_\_\_\_\_

*A resume may be attached only as additional information and will not be accepted in lieu of completing this section.*

**(Please duplicate this page if needed)**

**Applicant's Certification and Agreement**

**Authorization to Release Information**

**Conditions of Employment**

I hereby declare the information provided by me in this application is true and complete, and I understand that misrepresentations, omissions of facts, or falsification of this information are grounds for refusal to hire, or if hired, termination.

I authorize any persons or organizations to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damage which may result from furnishing such information to you.

I authorize you to request, receive, and verify all information given in this application.

If I am employed by the White County Government, I agree to conform to the policies, rules and regulations of the government set forth in the White County Government's Personnel System, employee handbook, policies, and ordinances; and acknowledge that these policies, rules, and regulations may be changed, interpreted, withdrawn, or added to by the employer at any time, at the employer's sole option.

I further acknowledge that if I become employed with White County Government, my employment will be at-will and may be terminated with or without cause at any time by me or by the employer.

If required by White County Government for the position I am applying, I consent to undergo a physical examination, after I have been offered employment, as deemed necessary.

***THIS APPLICATION WILL REMAIN ACTIVE FOR SIXTY (60) DAYS ONLY UNLESS RENEWED PERSONALLY BY ME IN WRITING.***

May we contact your present employer?  No  Yes  Presently not employed

You must sign the "Authorization to Release Information" form to enable us to contact prior employers, even though we may not contact your present employer.

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

**\*\*White County Government is a Drug Free Workplace\*\*  
Alcohol and Controlled Substance Testing**

As a condition of employment with White County Government, you will be required to submit to an alcohol and controlled substance screening test. In order to be employed by the White County Government, you must successfully pass this screening test. Candidates rejected for failing to pass the required screening will be required to wait at least 12 months before reapplying for employment. Employees must, as a condition of employment, abide by the White County Substance Abuse / Drug Testing Policy. Employees who are indicted for, or convicted of, a controlled substance related violation under state or federal law, or who plead guilty or no contest to such charges must inform their Supervisor or Human Resources in writing within five days of the conviction or plead (this is a requirement of the Drug Free Workplace Act of 1988). **Should you be offered a job with White County Government, your position will be subject to post accident and reasonable suspicion testing. All safety sensitive positions will be subject to random drug and alcohol testing. These requirements are in accordance with the County's Substance Policy.**

By signing this form, you are acknowledging that you consent to such an examination and screening test.

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

CONFIDENTIAL

WHITE COUNTY GOVERNMENT  
HUMAN RESOURCES DEPARTMENT

It is the policy of the White County Government to ensure equal opportunity in employment and promotion. This policy will be administered without regard to race, religion, color, national origin, marital or veteran status, sex, age, or disability.

For equal employment opportunity (EEO) statistical data, we request *the* following information. All information will be considered strictly private and confidential and will be used for EEO purposes only. This form is not part of the application for employment. **Failure to complete this form will not affect your application for a position.**

Your cooperation is appreciated. If you prefer not to reply, leave this sheet blank.

If you have questions, please contact the Human Resources Department at **706-865-2235**.  
\*\*\*\*\*

Position applied for: \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_

WITH WHICH ETHNIC GROUP DO YOU MOST IDENTIFY?

1. \_\_\_\_\_ Black - Not of Hispanic Origins.
2. \_\_\_\_\_ Caucasian - Includes origins in Europe, *North* Africa, Middle East; not Hispanic or East Indian.
3. \_\_\_\_\_ Hispanic - Includes origins of Mexican, Puerto Rican, Central American, South American or other Spanish cultures.
4. \_\_\_\_\_ American Indian/Alaskan Native
5. \_\_\_\_\_ Asian/Pacific Islander
6. \_\_\_\_\_ Other

REFERRAL SOURCE:

1. \_\_\_\_\_ Atlanta Journal
2. \_\_\_\_\_ Job Line
3. \_\_\_\_\_ Walk-In
4. \_\_\_\_\_ Job Posting Board
5. \_\_\_\_\_ Job Fair
6. \_\_\_\_\_ Friend or Relative
7. \_\_\_\_\_ Current Employee
8. \_\_\_\_\_ State Department of Labor
9. \_\_\_\_\_ Professional Journal
10. \_\_\_\_\_ Community Agency
11. \_\_\_\_\_ Other
12. \_\_\_\_\_ Employment Agency
13. \_\_\_\_\_ ACCG Website

**Name-Based Criminal History Record Information Consent/Inquiry Form**

I hereby authorize \_\_\_\_\_ White County Sheriff's Office \_\_\_\_\_ to conduct an inquiry for  
Agency/Company  
 the purpose listed below and receive any Georgia and/or national criminal history record information  
 as authorized by state and federal law.

Full Name (print)			
Address			
Sex	Race	Date of Birth	Social Security Number

- This authorization is valid for \_\_\_\_\_ days from date of signature.
- I, \_\_\_\_\_, give consent to the above-named entity to perform periodic criminal history background checks for the duration of my employment.

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

\_\_\_\_\_  
 Attorney for Individual (Pur E and U Only) Bar Number Date

Date of Inquiry: \_\_\_\_\_ Time of Inquiry: \_\_\_\_\_ Operator's Initials: \_\_\_\_\_

Purpose Code Used: (check one)

NON-CRIMINAL JUSTICE PURPOSES	
<input type="checkbox"/>	E - Employment
<input type="checkbox"/>	M - Working with Mentally Disabled
<input type="checkbox"/>	N - Working with Elderly
<input type="checkbox"/>	W - Working with Children
<input type="checkbox"/>	P - Public Records (no consent required)
PERSONAL REQUEST (INDIVIDUAL OR THEIR ATTORNEY)	
<input type="checkbox"/>	U - Personal Copy
CRIMINAL JUSTICE EMPLOYMENT	
<input type="checkbox"/>	J - Civilian Criminal Justice Employment (State & III Info Received)
<input type="checkbox"/>	Z - Sworn Criminal Justice Employment (State & III Info Received)

The inquiry resulted in the following: (check all that apply)

<input type="checkbox"/>	No Criminal Record Available
<input type="checkbox"/>	Criminal Record (Attached/Released)
<input type="checkbox"/>	No NCIC/GCIC Warrant
<input type="checkbox"/>	Possible NCIC/GCIC Warrant (List Wanting Agency Below)

Wanting Agency Name: \_\_\_\_\_

Wanting Agency Telephone: \_\_\_\_\_

\_\_\_\_\_  
 Agency Designee Signature and Title

**WHITE COUNTY HUMAN RESOURCES DEPARTMENT**  
**AUTHORIZATION TO OBTAIN MOTOR VEHICLE RECORD**

I understand that driving a White County vehicle (or my own vehicle, as required) is a requirement of the position I am being considered for and that having and maintaining a satisfactory driving record is a condition of my employment. I hereby authorize the White County Human Resources Department, to obtain any information in my files pertaining to my driving record for the time period indicated below on an annual basis upon hire.

This release is executed with full knowledge and understanding that the information is for official use of the White County Human Resources Department for the purpose of employment or underwriting of insurance and will not be used for any other purpose.

Consent is granted for the White County Human Resources Department to furnish such information as described above to third parties in the course of fulfilling its official responsibilities.

Full Name: \_\_\_\_\_  Male  Female  
(Print)

Date of Birth: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_ State Where Issued: \_\_\_\_\_

Driver's License Expiration Date: \_\_\_\_\_ Request: Three-year \_\_\_\_\_ Seven-Year \_\_\_\_\_

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

**\*All applicants applying for positions requiring the operation of a county vehicle (or a personal vehicle, as required) must provide a satisfactory three year driving record upon notification.**

**MEDICAL AFFIDAVIT**  
**WHITE COUNTY FIRE DEPARTMENT**  
**1241 Helen Highway, Suite 140**  
**Cleveland, GA 30528 706-865-3855**

O.C.G.A. 25-4-8(a)(5) requires that any person certified as a firefighter be in good physical condition as determined by a medical exam. The examining physician, physician assistant, or nurse operating under a physician's authority should complete this form.

O.C.G.A. 25-4-31(a) requires that any person assigned as an airport firefighter at any airport shall, as a minimum, meet the minimum physical fitness requirements as approved by the Georgia Firefighter Standards and Training Council.

**NOTE TO MEDICAL PERSONNEL:**

This applicant will have met the medical prerequisites necessary to gain employment or appointment at any fire department in the state of Georgia including but not limited to the current department of which he/she is a member.

Firefighters are charged with the responsibilities of mitigating a variety of emergency and non-emergency situations where life, property, or the environment is at risk. Firefighters may be required to work under extremely harsh environmental conditions requiring them to wear cumbersome protective clothing and equipment while performing strenuous physical activities. They may be required to perform rescue work and/or provide emergency medical treatment to individuals suffering from medical or traumatic emergencies. While performing or participating in these operations, firefighters may be required to make decisions that could have serious consequences to life and property.

\_\_\_\_\_ is applying to become a volunteer/certified firefighter. I have examined \_\_\_\_\_ and to the best of my knowledge, this person is in good physical condition.

\_\_\_\_\_  
Physician, Physician Assistant, Nurse (operating under a physician's authority) NAME – please print

\_\_\_\_\_  
Address

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

**\*\*Physician must also initial the following acknowledgment on page 2\*\***

*Routinely Assigned Duties – Fire Services Division Personnel*

Firefighters and Emergency Medical Responders are routinely expected to safely and effectively perform the following tasks under emergency and non-emergency conditions. Tasks require the ability to exert strenuous physical effort in work which may include some lifting, carrying, pushing and/or pulling of objects of moderate to heavy weight (50-200+ pounds) for sustained periods of time. Duties require the ability to operate a motor vehicle, various medical equipment, and hand tools. Operating in difficult terrain, confined spaces, and exertion for climbing steps or walking extended distances (+ or – 1 mile) are often required of this position.

Essential functions are regularly performed with exposure to adverse environmental conditions including inclement weather. Duties may involve exposure to substances (chemicals and gases) requiring special precautions including protective clothing and self-contained breathing apparatus. The work environment routinely involves imminent danger from conditions which cannot be fully anticipated or protected against, and which exposes the incumbent to life-threatening situations.

The classification should not be interpreted as all-inclusive. It is intended to identify the major responsibilities and requirements of this job. The incumbents may be requested to perform job-related responsibilities and other tasks than those stated in this specification.

Acknowledgement:

\_\_\_\_\_ Physicians Initials

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

JOB TITLE: Firefighter - Career

FD05

DEPARTMENT: Public Safety - Fire Services Division

**JOB SUMMARY:** The purpose of this job is to perform specialized duty work functions in preparing for and responding to fire / medical emergency calls and in providing general support within the Fire Department. Duties and responsibilities include maintaining readiness for emergency call response; responding to fire, medical and related emergency calls when dispatched and taking proper action; educating staff and public on fire safety / prevention; and performing other tasks related to County and Fire Department activities.

**MAJOR DUTIES:**

*The following duties are normal for this job. These are not to be construed as exclusive or all inclusive. Other duties may be required and assigned.*

- Respond to emergency calls for fire, medical, and other emergency situations.
- Removes individuals from dangerous / hazardous situations.
- Performs all activities necessary to suppress / extinguish fires.
- Assesses emergency medical problems and performs prescribed treatment as outlined and authorized under Georgia First Responder guidelines.
- Performs pre-fire surveys.
- Maintains hydrants
- Provides education to the public on fire safety / prevention – provides tours of fire station facilities.
- Cleans and maintains fire stations, grounds, apparatus and other equipment.
- Makes minor repairs and adjustments to apparatus and equipment.
- Operates machinery, equipment and light motor vehicles –may operate specialized fire vehicles and equipment with sufficient training and experience (fire engines, ladder trucks, pumps, etc.).
- Ensures appropriate maintenance.
- Receives and / or prepares various documentation (forms, checklists, reports, correspondence, etc.) processes, completes, and/or forwards as appropriate.
- Responds to routine requests for information from officials, employees, and members of the staff, the public or other individuals.
- Participates in and conducts training classes.
- May be required to fill in for a firefighter of a higher grade or rank on a temporary basis, but not to exceed 30 continuous shifts and perform related duties as required.
- May be required to perform other duties as necessary.
- Inspects and services fire hydrants, assists with the preparation of Pre-Incident Analysis and other such duties as may be assigned by the Fire Chief or Assistant Fire Chief. Maintains accurate inventory of fire hydrants and water flows.

**KNOWLEDGE REQUIRED BY THE POSITION:**

By the end of the employees' first year of employment will have considerable knowledge of the policies, procedures, and activities of the Fire Department practices to the performance of duties relating to the job of Certified Firefighter. Will have considerable knowledge of Fire Department practices as necessary in the completion of daily responsibilities. Will know how to develop and administer operations and staff plans and objectives for the expedience and effectiveness of specific duties of the department. Will know how to keep abreast of any changes in policy, methods, computer operations, equipment needs, etc. as they pertain to departmental operations and activities. Is able to effectively communicate and interact with supervisors, members of the general public and all other groups involved in the activities of the department. Is able to assemble information and make written reports and documents in a concise, clear and effective manner. Has good organizational, human relations, and technical skills. Is able to use independent judgment and work with little direct supervision when necessary. Has the ability to comprehend, interpret, and apply regulations, procedures, and related information. Has comprehensive knowledge of the terminology, principles, and methods utilized within the department. Will be knowledgeable and proficient with computers.

**SUPERVISORY CONTROLS:** The department station officer's assigns work in terms of general instructions. The officers spot-check completed work for compliance with procedures, accuracy, and the nature and propriety of the final results.

**GUIDELINES:** Guidelines include state statutes and laws, federal laws, county ordinances, department policies and procedures. These guidelines are generally clear and specific, but may require some interpretation in application.

**PHYSICAL REQUIREMENTS:** Must be physically able to operate a variety of machines, tools and equipment which includes a motor vehicle, computer, generator, fire pump, fire hydrant, axe, shovel, hydraulic tools, power tools, medical equipment, etc. Must be able to use body members to work, move or carry objects or materials. Must be able to exert in excess of one hundred pounds of force occasionally, and /or in excess of fifty pounds of force frequently. Physical demand requirements are at levels of those for very heavy work. The candidate must be able to be certified by a M.D. to be able to meet the medical condition as specified by Georgia Firefighters Standards and Training Council.

**PERSONAL CONTACTS:** Requires the ability of speaking and/or signaling people to convey or exchange administrative, firefighting and emergency medical information. Includes giving assignments and/or directions to co-workers or assistants.

**PHYSICAL DEMANDS:** The work is typically performed while sitting, standing, walking, running, bending, crouching, or stooping. The employee must be able to lift light or heavy objects, use tools and equipment requiring a high degree of dexterity, and distinguish between shades of color.

Requires the ability to handle a variety of items, equipment, control knobs, switches, etc. Must have the ability to use hand for twisting or turning motion while coordinating other hand with different activities. Must have average levels of eye/hand/foot coordination.

**WORK ENVIRONMENT:** The work is typically performed in a vehicle or outside. The employee may be exposed to noise, dust, and dirt, machinery with moving parts, contagious or infectious diseases, and inclement weather. The work may require the use of protective devices.

**SUPERVISORY AND MANAGEMENT RESPONSIBILITY:** Typically none, however, utilizing NIMS the individual could be part of the command structure on any given incident scene.

**MINIMUM REQUIREMENTS:**

**Minimum Training and Experience Required to Perform Essential Job Functions:**

- Current Georgia Certified Firefighter certification and / or NPQ 1 or higher certification.
- Requires nationally recognized First Responder certification or a higher certification.
- Requires documentation as a qualified Emergency Pumping Vehicle Operator and successful completion of a Fire Department Emergency Driving Course.
- The employee must possess and maintain a valid Georgia Class F Drivers License (or higher) at all times after employment.
- The employee must pass the annual physical ability test within the required time at least once annually.

**Minimum Qualifications of Standards Required to Perform Essential Job Functions:**

**Georgia Firefighters Standards and Training Council**

**Firefighter Certification Requirement: O.C.G.A 25-4-8**

- At least 18 years of age;
- Not have been convicted of a felony within 10 years prior to employment;
- Have good moral character as determined by investigation under procedure approved by the Council;
- Be fingerprinted and a search made of local, state and national fingerprint files to disclose any criminal record;
- Be in good physical condition as determined by a medical examination and successfully pass the minimum physical agility requirements as established by the Council;
- Possess a high school diploma or general education development equivalency.
- Successfully challenge the Georgia Firefighters Certification Examination
- Must have an acceptable driving record.

Revised 4/29/14