

# RURAL MUNICIPALITY OF MOUNTAIN FIRE DEPARTMENT APPLICATION



Applicants:

Thank you for your interest in the Rural Municipality of Mountain Volunteer Fire Departments.

We are a paid “On Call” organization responding to the emergency needs of our community. It is a very rewarding vocation, but there is a minimum commitment that we need and expect from our members.

For consideration as a member of the Rural Municipality of Mountain Fire Departments the following is required:

1. Complete the Rural Municipality of Mountain Volunteer Fire Department application form.
2. Submit a completed RCMP Criminal Record check, Manitoba Child Abuse Registry check, and Manitoba Drivers Licence Abstract.\*
3. Completion and return of the physician letter (form provided by the Rural Municipality of Mountain)
4. Successful interview with the Fire Chief and/or Deputy Chief
5. Successful completion of the probationary period.

\*Please note: all expenses for completion of required forms are the responsibility of the applicant.

Attendance to 70% of our regular training sessions and 100% of emergency calls that you are available for is expected as well as other weekend/evening training courses as they are offered. In addition, if you are interested in becoming a front line firefighter you will be required to complete the NFPA 1001 Fire Fighter Level 1 program offer through the Manitoba Emergency Service College when it is made available to the Department.

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Please select which Fire Department you are applying for:

Birch River

Pine River

Mafeking

## Personal Information

Last Name:	Given Name:
Mailing Address:	City:
Phone:	Cell:
Email:	

## Employment

Company Name	
Employer Address	
Occupation	
Hours of Work	
Supervisor Name	
Supervisor Work Phone	

## Basic Requirements

How long have you been a resident of resident of the RM of Mountain?	
Are you a Canadian Citizen?	
Are you 18 years of age or more?	
Do you have a valid Driver's Licence?	
What Classification of driver's licence do you have?	
Are there any restrictions on your driver's licence?	
Do you have Air Brake Endorsement on your driver's licence?	
Do you have access to a vehicle to respond to calls?	
Is your ability to perform Fire Fighting duties likely to be affected due to a current or previous illness or disability?	
Do you understand in order to be a front line firefighter you are required to remain without facial hair to ensure a self-contained breathing apparatus mask will form a positive seal on the face?	

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## Availability

Do you understand that in order to be available for emergency call-outs, you must be able to arrive at the fire station promptly and have abstained from alcohol and drugs for the previous 8 hours?	
Are you willing and able to download smart phone app 'U Respond' and respond to emergencies?	
Is your employer in support of your application and willing to allow you to attend fire calls during your regular hours of work?	
Are you available to respond to calls during:	
Day	
Night	
Weekends	

## Skills and Experience

**Please indicate if you have any of the following skills or training:**

First Aid Certificate/CPR/AED (date last taken)	
Previous Emergency Volunteer Experience – Explain:	
Previous Firefighter Experience – Explain:	
Skilled Trade:	
Other (describe):	

## References

**Please provide two references that are not related to you  
(preferably from current or previous employers)**

Last Name:	First Name:
Company:	
Phone Number:	
Last Name:	First Name:
Company:	
Phone Number:	

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By signing this application I certify that all the information submitted in this application is truthful and correct. I understand that if I provide information in connection with my application which is found to be untrue or incomplete, my application may be rejected and I may be subject to discipline up to and including termination if I am hired as a successful applicant.

If accepted, I will undertake to perform all duties to the best of my ability, as may be assigned to me by the Fire Chief, or his delegated representative in the RM of Mountain Fire Department.

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Signature

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Date

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# RURAL MUNICIPALITY OF MOUNTAIN FIRE DEPARTMENT APPLICATION



**CONFIDENTIAL**

Doctor,

\_\_\_\_\_ is applying to become a recruit firefighter with the RM of Mountain Fire Department.

Firefighting can involve extreme physical and mental demands. Both the fire department and the applicant need to know that the applicant is fit to perform the duties of a firefighter.

Firefighters should be in good physical condition. They may also be required to function in extreme conditions, including heights, enclosed spaces, in and around water, in extreme temperatures, and operate tools, all while wearing full personal protective clothing and self-contained breathing apparatus, which weights +/- 55 lbs.

Please confirm that the recruit applicant is medically fit and, in your opinion, able to perform the duties of a firefighter in a manner which will not endanger the safety of the applicant or others.

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

ATTENTION: Fire Chief (or designate)

I have examined \_\_\_\_\_ and reviewed the statement referred to above and confirm that the applicant is fit to perform the duties of a firefighter.

I acknowledge that firefighting can involve extreme conditions and have advised \_\_\_\_\_ of the importance of remaining in good physical condition.

Yours truly,

Doctor's Signature: \_\_\_\_\_

Doctor's Name (please print): \_\_\_\_\_

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