





Please read the information on the following pages prior to completing the Application Form. This information will outline the entrance requirements and selection procedures for the position of the Work Experience Program Firefighter for the Yellowhead County Fire Department, as well as define the expectations of the WEP.

ENTRANCE REQUIREMENTS (required at the time of application):

- ✓ Accredited Fire Program Graduate
- ✓ Age 18 and 60 years
- ✓ Valid & Current Driver's License within Canada
- ✓ Commit to the 12-month duration of the Work Experience Program. *Individuals hired by a career department during this Program will be relieved of this commitment.*
- ✓ Completed Medical Checklist BY CANDIDATE (attached)
- ✓ Cover Letter must include information not provided in your resume, we want to know your passions, goals and interests, and why you want to be a part of the YCFD WEP
- ✓ Resume
- ✓ SUCCESSFUL CANDIDATE WILL BE REQUIRED TO PROVIDE THE FOLLOWING:
 - o Doctor's Medical Clearance or Certificate of Fitness (following NFPA guidelines); and
 - Vulnerable Sector Check.
 - 5 Year Drivers Abstract

ITEMS CONSIDERED ASSETS (not required)

- ✓ Advanced First Aid Training
- ✓ Previous firefighting experience or other related work or volunteering
- ✓ Class 1 or 3 Driver's License
- ✓ Air-Brake Endorsement
- ✓ Post-Secondary Degree(s) or Diploma(s) (provide copies)
- ✓ Technical, Trades or equivalent level of certification (provide copies)
- ✓ Considerable Mechanical Aptitude

KEEP A COPY OF THIS APPLICATION FOR YOUR INFORMATION

All applicants are evaluated using a weighted scoring system based on the above requirements, this application and interview.



WEP FIREFIGHTER Scope of Work

WEP Firefighters are responsible for Fire Suppression, Vehicle Rescue, Dangerous Goods Response, and Medical Emergency Response within Yellowhead County fire protection boundaries to department's standards. WEP Firefighters participate in training as required by the department's training program. WEP Firefighters participate in regular shift routines and duty coverage. As part of their commitment WEP Firefighters will participate in Fire Prevention, Public Education, Company Fire Inspections, Fire Pre-Planning, Station and Equipment Maintenance.

Without restricting the general nature and scope of the work, the following are illustrative examples of work which may be expected in the classification of WEP Firefighter:

- Is prompt to all meetings and training;
- Familiarizes themselves with the handling, care and maintenance of all department equipment;
- Attends promptly when the alarm is sounded;
- Lays and connect hose, directs water streams, raises and climbs ladders, uses portable extinguishers, self-contained breathing apparatus, and all other firefighting, rescue, tools and equipment;
- Searches for and rescues persons from danger;
- Ventilates premises to release heat and smoke; places salvage covers to prevent water damage;
- As assigned, drives and operates YCFD motor driven firefighting apparatus;
- Remains on the scene of an incident until released by the officer-in-charge;
- Returns to the fire station after incidents and assists in cleaning of equipment and returning apparatus and equipment back in service.
- Reports the loss or damage of apparatus or equipment;
- Cleans and maintains personal protective equipment and ensures its ready state;
- Ensures his/her name has been recorded on the attendance sheet for alarms and training; and
- Performs related duties as required.



Work Experience Program (WEP) Firefighter Routine, Rules and Regulations

- The intention of the WEP firefighter program is to give recent graduates of an accredited firefighter program the opportunity to gain firefighting experience to help move them toward a career in firefighting.
- Yellowhead County has provided living accommodations in the fire station for the WEP firefighter. This allows the WEP firefighter the most opportunity to respond to incidents out of Station 10 after hours as a Paid-on-Call.
- Because firefighting is the chosen career path, WEP firefighters will be held to a high standard of professionalism and commitment. With this the WEP firefighter is;
 - o expected to attend station training and courses, unless otherwise approved.
 - expected to attend Station 10 callouts evenings and weekends, unless otherwise approved.
- WEP firefighters are Paid on Call members of Station 10 during their 12-month tour. During their time in which they are not on a day crew shift, they report to the East Division Chief. During their time on a day crew shift, and anything that is relating to the day crew shift, they report to a Fulltime Lieutenant.
- WEP firefighters must report for their scheduled shift at least 15 minutes early. You must be ready for emergency response with full PPE (Turn-out gear, helmet, SCBA face mask, gloves, balaclava, boots, coveralls, and radio). This equipment is your responsibility to maintain and keep clean.
- Late arrival for duty may result in an extra duties while on shift, or you may be dismissed for that particular day. Other tardiness may result in discharge from the program.
- WEP firefighters must arrive for shift work in full uniform as assigned: clean-shaven, clean
 and pressed uniform shirt over Yellowhead County Fire Department tee-shirt, shined
 hardware, black belt with clean and pressed pants, shined black safety toed boots. Onduty coverage Night shift will remain in full uniform or pants and Yellowhead County Fire
 Department tee-shirt until quiet time at 2200. Uniform issue may only be worn when on
 duty or representing Yellowhead County Fire Department at community events.

INITIAL:

Page **3** of **12**



FIREFIGHTER APPLICATION

YELLOWHEAD COUNTY FIRE DEPT. WORK EXPERIENCE PROGRAM (WEP)

- WEP firefighters do not accumulate vacation leave during their 12-month tour. Transfers
 of shifts are limited to only take place and paid back within pay periods (two weeks) and
 must be approved by the Fire Chief or Deputy Fire Chief of Public Safety (in charge of
 scheduling).
- WEP firefighters do not accumulate sick days or hours, it is to be understood that effort should be made to contact the Fulltime Lieutenant, or the station officer on shift, to arrange shift coverage.
- The Fire Station is a place of business Mon-Friday 7am 5pm. WEP firefighters, while not
 on duty, must be dressed appropriately during business hours while in the Fire Station
 outside of their dormitory. WEP firefighters, while not on duty during business hours, will
 not go out onto the floor with the day crew unless authorized by the Fulltime Lieutenant or
 officer in charge.
- WEP firefighters are expected to use the fire department dormitory (Station 10) as their principal residence. Members who spend an excessive amount of time away from the dorm will be asked to leave the program.
- WEP firefighter quarters may be inspected weekly, on Monday or on random visits by the Fire Chief. All house quarters shall be presentable at all times. Duties not attended to will result in disciplinary action from the Fire Chief. The firefighter quarters should be kept vacant of public and wandering guests.
- Guest(s) of firefighters must have permission to enter from the Fire Chief. With the exception of Family emergencies and cleared with the Fire Chief, Guests are not permitted until you have completed 3 months' probation period.
- WEP Firefighters will be held accountable for order and cleanliness. The following guidelines will apply:
 - Clothes hung in closets and put in drawers.
 - Beds made when not in use.
 - Floors vacuumed regularly.
 - Bathrooms and showers cleaned.
 - o Dishes and glasses returned to the kitchen and/or dishwasher.
 - Trash emptied "as needed" in dorm, daily in kitchen.
 - Recyclables stored and taken out to bins at transfer station or to bottle depot for refund.
 - Common living and kitchen areas presentable to public.
 - IF YOU HAVE TIME TO COOK, YOU HAVE TIME TO CLEAN!
 - Kitchen supplies; pot and pans, dishes or food should be stored in cabinets as assigned.
 - Other special duties assigned, or taken in the absence of a fellow firefighter

INITIAL:





- It is the responsibility of WEP firefighters to establish and adhere to a schedule for the above duties. Failure to maintain these duties will be held against <u>all</u> WEP participants.
- WEP firefighters may be held personally liable for any damages to property or equipment.
- Small problems that arise shall be solved among the firefighters. The Lieutenant the WEP reports to should be informed of a problem that is beyond the scope of solving inhouse.
- Liquor and Liquor containers, and legal drugs (Marijuana) are prohibited in the fire hall.
- Smoking is not permitted in the Fire Station or in any Yellowhead County building or vehicle. Tobacco use is strongly discouraged in any form.
- There is "ZERO TOLERANCE" for drug use of any kind.
- Quiet time is from 2200 hours to 0600 hours daily.
- Yellowhead County Fire Department will supply 4 uniform shirts, 4 YCFD tee shirts, 4 uniform pants and one uniform belt, steel toe station boots. YCFD will supply all required Personal Protective Equipment. Only YCFD issued uniform and PPE may be worn while on shift.
- Conduct yourself in an appropriate manner at all times, as you are a member of this organization and representative of the department. Refrain from disruptive or rowdy behavior when out in public.
- WEP firefighters shall not allow their conduct to cast an adverse reflection on themselves or Yellowhead County Fire Department. Rules of common courtesy and respect for the individual will be given to all fellow members of the department. Treat others as you would like to be treated.
- Any WEP firefighter whose presence, in the opinion of the Fire Chief, is disruptive to the good of the order or operation of the fire hall and or community, will be removed from the WEP program, and will be asked to terminate residence at Station 10 within 24 hours.
- If a WEP firefighter is asked to perform a task that they have not been properly trained for, they shall convey this to the person requesting the task. WEP Firefighters will not be expected to perform beyond the level they have been trained to.
- Yellowhead County Fire Department expects a 12 month commitment to the WEP firefighter program. (Exceptions may be made for WEP firefighters hired with a Career Fire Department).

INITIAL:





- All WEP Firefighters will be required; in writing to give at least 2 weeks notice or longer if they intend to leave the WEP program. Letters of reference will not be given if this is not adhered to. (Exceptions may be considered if the participant is hired by a Career Fire Department)
- Infractions of order and or operations of the Yellowhead County Fire Department will follow YCFD Disciplinary Best Practice #2017.001.
- Disciplinary action for breaking these above rules or any Yellowhead County rules, policies or procedures, shall follow the Yellowhead County Human Resource policy 1200.08.27.
- WEP firefighters are responsible to ensure establishment/maintenance of all applicable insurances (tenants insurance, etc.).
- Each WEP firefighter must agree to these terms in writing before acceptance as a Work Experience Program Firefighter for Yellowhead County Fire Department.

I, _____, have read and understood the Routine, Rules and Regulations expected of the Work Experience Program.

 Dated at ______ this _____ day of _____ 2024

Candidate Signature



PART 1: APPLICANT INFORMATION AND REFERENCES *Information highlighted in red is mandatory.*

First Name:	rst Name: Last Name:		
Date of Birth:			
Cell Phone Number: Home Phone N		lumber:	
Email: Alt Contact Method:		thod:	
Mailing Address:		Postal Code:	
City/State:		Country:	
Physical Address:		Postal Code:	
City/State:		Country:	

Have you completed a recognized Fire Service Training Program?	YES	NO
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If yes:

Institute/College	Province/State		
Year Completed	Did you receive NFPA 1001 Accreditation?		
	Ν		
ENSURE COPY OF OBTAINED CERTIFICATE(S) ATTACHED TO APPLICATION			
May we contact any current or past employer as	a reference? YES NO		
If no, please explain:			



PROFESSIONAL REFERENCES: (Not related by blood or marriage)

Reference 1		
Name:		
Phone:		
Title:		
Company:		
Reference 2		
Name:		
Phone:		
Title:		
Company:		

PART 2: EXPERIENCE AND EDUCATION

Have you ever been a member of any fire department, rescue squad or similar organization?

Response Type (check all that apply):						
	Fire Department Rescue Medical Other:					
		PRIOR DEPAR	TMENT(S) IN	FORMATION		
	Name	Address	Phone Number	Dates of Service	Reason for Leaving	
1						
2						

List all relevant training (attach copies of certificates)



Please list the types of equipment you were trained to use: (Specify licenses or certificates and attach copies as appropriate)

SCBA	Small Tools	Ladders	Gas Powered Tools
Pumps	Fire Hoses	Driving Apparatus	Hydraulic Rescue Tools
Other:			

SECONDARY SCHOOL			
Name of School:			
Highest Grade Completed:			
Year Completed:			
POST-SECON	IDARY SCHOOL (attach copies of degree/diploma/transcripts)		
Name of School			
Program:			
Dates:	From to MM/DD/YYYY MM/DD/YYYY		
Complete:	YES NO		
Have you completed additional post-secondary education YES NO (attach copies as appropriate)			
Have you completed any certifications additional to the YES NO education listed above?			

 Have you completed any apprenticeship programs
 YES
 NO

 additional to the education listed above?
 Have you hold any current First Aid Certifications?
 YES
 NO

 Have you hold any current First Aid Certifications?
 YES
 NO

 (attach copies as appropriate)
 YES
 NO

 Do you hold any current Life Saver Training Certifications?
 YES
 NO

Other relevant training/education:



VOLUNTEER EXPERIENCE

Please check all that apply:

	Military Cadets	Sports/Coaching		Big Brother/Bi	g Sister
	Auxiliary Police	Scouts/Guides/C	adets	Neighborhood	/Community Watch
	Citizens on Patrol	Other:			
		VOLUNTEER EX	(PERIENCE II	NFORMATION	
	Organization	Contact Name	Phone Number	Dates of Service	Duties/Roles
1					
2					
3					

Continue to Part 3.



PART 3: INTENTIONS

Tell us why you wish to join the YCFD Work Experience Program.

As a potential WEP candidate, what sets you apart from other candidates? Why should YCFD choose you as the next to join the WEP.



YELLOWHEAD COUNTY FIRE DEPARTMENT APPLICANT MEDICAL REPORT

LAST NAME	GIVEN NAME	MIDDLE NAME OR INITIALS

This questionnaire is designed as a condition to the rigorous physical fitness requirements that a Fire Fighter has to endure during training and emergencies.

1)	Have you ever been bothered by shortness of breath?	□ YES □ NO
2)	Have you had frequent bouts of respiratory problems, such as influenza, asthma or pneumonia?	
3)	Have you any back problems that would prevent you from lifting heavy objects?	□ yes □ no
4)	Has your Doctor ever said you have heart trouble?	
5)	Do you often feel faint or have spells of severe dizziness?	□ YES □ NO
6)	Do you frequently have pains in your heart or your chest?	□ yes □ no
7)	Have you experienced or been diagnosed with high blood pressure?	
8)	Has your doctor ever told you that you have a bone joint problem such as arthritis, which has been aggravated by exercise, or might be made worse with exercise?	
9)	Is there any good reason not mentioned here why you should not undergo strenuous testing or exertion, even if you wanted to?	□ YES □ NO
10)	Do you have any	□ YES □ NO
11)	Are you in good physical shape and accustomed to moderate to vigorous exercise?	
12)	Is there any medical reason, not mentioned here, why you should not undergo moderate to strenuous physical testing, training or activities, even if you wanted to?	

You will not be allowed to participate in the practical physical training evaluations or job related tasks until you present the signed PHYSICIANS REPORT from your physician indicating that you are cleared to participate.

DATE:	Applicant	
	Signature:	



I CONFIRM THAT MY APPLICATION IS COMPLETED TRUTHFULLY, AND CORRECTLY.			
Any false, erroneous, or misleading answers or statements will be cause for rejection of this application, removal of your name from the eligible list or discharge from the department.			
Signature of Applicant Date			
Internal Use Only			

DATE RECEIVED:

REVIEWED AND SCORED BY:

HOW TO SUBMIT MY WEP APPLICATION:



PREFFERED AND REQUESTED SUBMISSION METHOD:

To submit application email to address listed below. Please attach all additional copies of certifications, education, training, relevant information, to the email subject line YCFD WEP 2024 Application "Last Name".

Email should be sent to

<u>ycfdadmin@yhcounty.ca</u> OR



IF SUBMITTING ELECTRONICALLY IS NOT POSSIBLE:

Return to attention of:

Work Experience Program Head Quarters Staff Yellowhead County Fire Dept. 2716 1 Avenue, Edson, AB T7E 1N9

ALL INFORMATION MUST BE ATTACHED AS REQUESTED ON PAGE 1 OR YOUR APPLICATION WILL NOT BE ACCEPTED.