

YELLOWHEAD COUNTY
YCFD WORK EXPERIENCE PROGRAM (WEP)
FIREFIGHTER APPLICATION



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+
- ✓ Valid and current Canadian Driver's License
- ✓ 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 (page 12);
- ✓ 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;
- ✓ Detailed resume;

A SUCCESSFUL CANDIDATE WILL BE REQUIRED TO PROVIDE THE FOLLOWING:

- ☐ 5-Year Driver's Abstract;
- ☐ Doctor's Medical Clearance or Certificate of Fitness; and
- ☐ Police Information Check with Vulnerable Sector.

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.

YELLOWHEAD COUNTY
YCFD WORK EXPERIENCE PROGRAM (WEP)
FIREFIGHTER APPLICATION



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 their name has been recorded on attendance sheets for alarms and training; and
- Performs related duties as assigned.

YELLOWHEAD COUNTY
YCFD WORK EXPERIENCE PROGRAM (WEP)
FIREFIGHTER APPLICATION



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 their assigned station 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 should;
 - plan to attend station training and courses; and
 - plan to attend callouts evenings and weekends.
- WEP firefighters are Paid on Call members during their 12-month term. During their time in which they are not on a day crew shift, they report to their assigned 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.
- Paid on Call Thursday night training sessions are mandatory and will start promptly at 1900hours. WEP firefighters who join the Paid On-Call Volunteer service will have 48 hours before training to request to be absent from training, request to be made to the Deputy Fire Chief.
- WEP firefighters will work out of their assigned station. The WEP firefighter is personally responsible for travel to and from each station. WEP firefighters will be responsible to be on duty for assigned shift. Night shifts may be assigned on a standby basis as necessary.
- 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 t-shirt, shined hardware, black belt with clean and pressed pants, shined black safety toed boots. On-duty coverage Night shift will remain in full uniform or pants and Yellowhead County Fire Department t-shirt until quiet time at 2200hours. Uniform issue may only be worn when on duty or representing Yellowhead County Fire Department at community events.

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YELLOWHEAD COUNTY

YCFD WORK EXPERIENCE PROGRAM (WEP) FIREFIGHTER APPLICATION



- WEP firefighters do not accumulate vacation leave during their 12-month term. 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 (or designate 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 Lieutenant, or the station officer on shift, to arrange shift coverage.
- The Fire Station is a place of business Monday-Friday 0700-1700hours. 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 Lieutenant or Officer in charge.
- WEP firefighters are expected to use the provided living quarters as their principal residence during their 12-month term. Members who spend an excessive amount of time away may be asked to leave the program.
- Provided living quarters are a taxable benefit to the WEP firefighter. Learn more about Taxable Benefits for Housing and Utilities on the [Government of Canada website](#).
- WEP firefighter quarters will be inspected regularly. All house quarters shall be presentable at all times. Duties not attended to may result in disciplinary action from the Fire Chief or designate. 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 or designate. With the exception of Family emergencies and cleared with the Fire Chief or designate, Guests are not permitted until completion of the 3 month probation period.
- WEP Firefighters will be held accountable for order and cleanliness. The following guidelines will apply:
 - Clothes must be hung in closets and put away in drawer and beds must be made when not in use.
 - Common living, bathroom, shower and kitchen areas must be cleaned regularly and kept presentable at all times.
 - Dishes and glasses are to be returned to the kitchen and/or placed in the dishwasher.
 - Trash must be emptied "as needed" in the living quarters and daily in the kitchen.
 - Recyclables are to be stored and taken out to bins at transfer station or to bottle depot for refund.
 - 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 duties are to be completed as assigned or completed in the absence of a fellow firefighter.

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YELLOWHEAD COUNTY
YCFD WORK EXPERIENCE PROGRAM (WEP)
FIREFIGHTER APPLICATION



- 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 **all** 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 Deputy Fire Chief should be informed of a problem that is beyond the scope of solving in-house.
- 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.
- 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 behaviour when out in public.
- WEP firefighters shall not allow their conduct to cast an adverse reflection on themselves, 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 or designate, 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 leave the premises within 24 hours.
- WEP firefighters are only to use designated station areas.
- 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).

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YELLOWHEAD COUNTY

**YCFD WORK EXPERIENCE PROGRAM (WEP)
FIREFIGHTER APPLICATION**



- 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 expectations, rules, policies and 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 _____ 20____

Candidate Signature

YELLOWHEAD COUNTY
YCFD WORK EXPERIENCE PROGRAM (WEP)
FIREFIGHTER APPLICATION



PART 1: APPLICANT INFORMATION AND REFERENCES

Information highlighted in red is required

First Name:	Last Name:
Date of Birth:	
Cell Phone Number:	Home Phone Number:
Email:	Alt Contact Method:
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

IF YES:

Institute/College	Province/State
Year Completed	Did you receive NFPA 1001 Accreditation?

ENSURE COPY OF OBTAINED CERTIFICATE IS ATTACHED TO APPLICATION

May we contact any current or past employer as a reference? ☐ YES ☐ NO

If no, please explain:

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YELLOWHEAD COUNTY**YCFD WORK EXPERIENCE PROGRAM (WEP)
FIREFIGHTER APPLICATION****PROFESSIONAL REFERENCES:***(Not relation to candidate)*

Reference 1	
Name	
Relationship	
Phone	
Title	
Company	
Reference 2	
Name	
Relationship	
Phone	
Title	
Company	

PART 2: EXPERIENCE AND EDUCATION

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

☐ YES☐ NO

Response Type (check all that apply):

☐ Fire Department☐ Rescue☐ Medical☐ Other: _____

MOST RECENT DEPARTMENT INFORMATION					
	Name	Address	Phone Number	Dates of Service	Reason for Leaving
1					
2					

List all relevant training (attach copies of certificates)

YELLOWHEAD COUNTY
YCFD WORK EXPERIENCE PROGRAM (WEP)
FIREFIGHTER APPLICATION



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-SECONDARY SCHOOL (attach copies of degree/diploma/transcripts)	
Name of School	
Program:	
Dates:	From to MM/DD/YYYY MM/DD/YYYY
Complete:	<input type="checkbox"/> YES <input type="checkbox"/> NO

Have you completed additional post-secondary education (attach certificates as appropriate) ☐ YES ☐ NO

Have you completed any certifications additional to the education listed above? ☐ YES ☐ NO

Have you completed any apprenticeship programs additional to the education listed above? ☐ YES ☐ NO

Do you hold any **current** First Aid Certifications? (attach copies as appropriate) ☐ YES ☐ NO

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

Other relevant training/education:

YELLOWHEAD COUNTY
YCFD WORK EXPERIENCE PROGRAM (WEP)
FIREFIGHTER APPLICATION



VOLUNTEER EXPERIENCE

Please check all that apply:

- ☐ Military Cadets ☐ Sports/Coaching ☐ Big Brother/Big Sister
☐ Auxiliary Police ☐ Scouts/Guides/Cadets ☐ Neighbourhood/Community Watch
☐ Citizens on Patrol ☐ Other: _____

ALL RELEVANT/NOTE WORTHY VOLUNTEER EXPERIENCE					
	Organization	Contact Name	Phone Number	Dates of Service	Duties/Roles
1					
2					
3					

If volunteer experience exceeds allowable note area, please attach a separate file titled "Volunteer Experience" for review.

PLEASE INDICATE YOUR DESIRED INTAKE(S):

- ☐ Fall 2026 intake
☐ Spring 2027 intake
☐ Fall 2027 intake
☐ Please hold my application for future intakes occurring within the next 12 months.

* It is important to note that the Work Experience Program may experience vacancies throughout the year due to WEP firefighters leaving for career opportunities. Should vacancies arise outside of the regular intakes outlined above, high scoring candidates will be called at any time to determine availability and interest.

[Continue to Part 3]

YELLOWHEAD COUNTY
YCFD WORK EXPERIENCE PROGRAM (WEP)
FIREFIGHTER APPLICATION



PART 3: INTENT

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? ☐ YES ☐ NO
- 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? ☐ YES ☐ NO
- 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? ☐ YES ☐ NO
- 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? ☐ YES ☐ NO
- 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 allergies? _____ ☐ YES ☐ NO
- 11) Are you in good physical shape and accustomed to moderate to vigorous exercise? ☐ YES ☐ NO
- 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? ☐ YES ☐ NO

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:

YELLOWHEAD COUNTY
YCFD WORK EXPERIENCE PROGRAM (WEP)
FIREFIGHTER APPLICATION



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:

1

PREFERRED AND REQUESTED SUBMISSION METHOD:

To submit application, hit "SUBMIT" on the bottom right corner of this application. Hitting "SUBMIT" will generate an email. Please attach all additional copies of certifications, education, training, relevant information, prior to sending email.

Email should be sent to ycfdadmin@yhcounty.ca

OR

2

IF SUBMITTING ELECTRONICALLY IS NOT POSSIBLE:

Return to attention of: Yellowhead County Work Experience Program
YCFD Head Quarters Staff
2716 1 Avenue, Edson, AB
T7E 1N9

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