



Troy Fire Protection District

700 Cottage St.
Shorewood, IL 60404

Troy Fire Commission



Phone 815-725-2149

Fax 815-725-0772

Dear Applicant,

Thank you for your interest in the Troy Fire Protection District. You have decided to apply for the entrance examination for Firefighter/Paramedic. This entrance list is created to have an availability list for any upcoming openings at Troy Fire Protection District.

In this application packet you should have the following documents:

- The Application Booklet. This must be completed in its entirety and returned by the deadline. (Total of 12 pages)
- An information sheet with Job Posting, Qualifications, Dates and Times of the testing process. Total of 4 pages)
- Information of Preference Points available. (Total of 1 page)
- An Authorization Form for the Troy Fire Protection District. This **MUST** be notarized and returned with your application packet.
- An Authorization Form from CLS Enterprises. This form **MUST** be completed and returned with your application packet.

Thank you for your interest and good luck with the application process and your placement on the Troy Fire Protection District Eligibility List.

Andrew Doyle
Chief Andrew Doyle



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ANNOUNCEMENT OF TESTING FOR THE POSITION OF FIREFIGHTER/PARAMEDIC

The Board of Fire Commissioners of the Troy Fire Protection District, Shorewood, Illinois, announces that it will establish an eligibility list for the position of firefighter/paramedic. *Applications will be available on our website: www.troyfirepd.com and Troy Fire Protection District Station #1, 700 Cottage Street, Shorewood, Illinois on Monday September 12, 2016. Applications MUST be returned in person and show a valid driver's licenses to Troy Fire Protection District Fire Station #1 700 Cottage Street, Shorewood, Illinois on the following dates:*

Monday through Friday, September 12, 2016 – September 16, 2016, from 8:00 a.m. to 4:00 p.m.

****The application period will close on Friday, September 16, 2016 at 4:00 p.m.****

All completed applications must be filed in person. There is a \$35.00 cash or money order (non-refundable) application fee and is limited to one application per person. **If any personal information on your application needs to be updated, you are required to provide that information to the district.**

First Stage – Position Requirements

1. **Age:** Applicants must have attained the age of 21 prior to November 22, 2016 and under the age of 35 on November 22, 2016, unless the candidate meets statutory exemption.
2. **Certification Requirements:** Applicants must have Basic Operations Firefighter certification from the Illinois State Fire Marshal's Office at the time of application. Applicants must be EMT-P certified/licensed from the Illinois Department of Public Health at time of hire. Applicants will be required to test and be accepted as part of the Morris Hospital EMS System within 60 days of hire.
3. **Vision:** Applicants are required to meet visual acuity standards with uncorrected vision of 20/100 corrected to 20/20 in the better eye and 20/40 in the poorer eye. Applicants must be able to distinguish between colors and shades as required by the position.
4. **Education:** Graduation from a high school or evidence of a G.E.D. equivalence diploma and be able to read, write and speak the English language.
5. **Residency:** Any candidate appointed would be granted one (1) year to establish residency within seventy (70) miles from the Fire District boarders.



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6. **Driver's License:** Applicants must possess a valid driver's license both at the time of application and the time of appointment, and must maintain during employment. Applicants will also be required to obtain an Illinois Class B non-CDL license during their probationary period.
7. **CPAT & Ladder Certification:** Valid CPAT card and ladder certification at time of hire. A Valid CPAT Card is one that has been issued no more than one (1) year prior to the date of the Written Exam. Websites for obtaining your certification: www.sufd.org or www.nipsta.org. Note: You may obtain your CPAT at other locations.
8. **Testing Content:** The testing process will include, but may not be limited to: a written examination and oral interview.
9. **Conditional Offer of Hire:** Upon receiving a conditional offer of hire, all candidates will be subject to a background check (including State Police and Federal Bureau of Investigation records) and must pass a complete medical examination which may include comprehensive drug testing and a psychological test.

Second Stage – Orientation

Troy Crossroads School – 210 E. Black Road, Shorewood, Illinois 60404

A **MANDATORY** orientation session will be held on Saturday October 15, 2016 at 9:00 a.m.

Registration is 8:30 a.m. to 9:00 a.m. Applicants must show a valid driver's license at the time of registration. **No one will be admitted after 9:00 a.m.** Applicants must attend the orientation session to continue the application process.

Third Stage – Written Exam (written exam constitutes 40% of total score)

Troy Crossroads School – 210 E. Black Road, Shorewood, Illinois 60404

The written exam will be held on Saturday October 22, 2016 at 9:00 a.m. Registration is 8:30 a.m. to

9:00 a.m. Applicants must show a valid driver's license at the time of registration. **No one will be admitted after 9:00 a.m.** Applicants must attend the written exam to continue the application process.

Fourth Stage – Oral Interviews (oral interview constitutes 60% of total score)

Troy Fire Station #1 – 700 Cottage Street, Shorewood, Illinois 60404

All candidates advancing to the oral interview stage, who have met all the conditions of the application, will be notified of the time to appear for the interview with the commissioners at Troy Fire Protection District Station #1.



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Fifth Stage – Creation of the Eligibility List

The Board of Fire Commissioners shall create the initial eligibility list of those candidates who qualify to become a firefighter/paramedic with the Troy Fire Protection District. Candidates will be e-mailed a copy of the initial eligibility list and may also visit www.troyfirepd.com for postings. A full explanation of how preference points may be claimed will be provided to all candidates at the end of the Oral Interview stage.

After the initial eligibility list is created, candidates who are eligible for preference points may submit a claim for those points in writing to the Board of Fire Commissioners. This claim must be made within ten (10) days after the posting of the initial eligibility list or points will be deemed waived. Claims must be submitted in person or by mail to the Troy Fire Protection District Station 1 no later than 3 p.m. on the 10th day after the posting of the initial eligibility list. The Troy Fire Protection District is not responsible for lost or misdirected mail.



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Candidate Information Packet Firefighter/Paramedic Test 2016

Friday September 16, 2016	4:00 P.M.	Last day to turn in application to Troy Fire Protection District Fire Station 1 700 Cottage Street Shorewood, IL 60404
There is a \$35.00 application fee (cash or money order ONLY, non-refundable)		

Saturday October 15, 2016	9:00 A.M.	Orientation Meeting- Mandatory Troy Crossroads School 210 E. Black Road Shorewood, IL 60404
MUST HAVE PHOTO ID DOOR CLOSE PROMPTLY AT 09:00 A.M.		

Saturday October 22, 2016	9:00 A.M.	Written Exam Troy Crossroads School 210 E. Black Road Shorewood, IL 60404
MUST HAVE PHOTO ID DOOR CLOSE PROMPTLY AT 09:00 A.M.		

Saturday November 12, 2016	9:00 A.M.	Oral Interviews Troy Fire Protection District Fire Station 1 700 Cottage Street Shorewood, IL 60404
Candidates will be notified		

Wednesday November 16, 2016	4:00 P.M.	Posting of Initial Eligibility List
Friday December 2, 2016	3:00 P.M.	Check website: www.troyfirepd.com Preference Points Due by 3:00 p.m.
Wednesday December 7, 2016	4:00 P.M.	Posting of Final Eligibility List Check website: www.troyfirepd.com



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TROY FIRE PROTECTION DISTRICT PREFERENCE POINTS FOR FIREFIGHTER/PARAMEDIC CANDIDATES ELIGIBILITY LIST 2016

1. Veteran's Preference Points

Applicants who served in the United States military actively for at least one year and who were honorably discharged or are now on inactive or reserve duty shall receive five (5) points. Proof of such service must include a copy of Military Form DD-214 (long form) as proof of active service, evidence of the honorable discharge and a sworn affidavit by the applicant. Veteran's and educational preference points shall not be cumulative.

2. Educational Preference Points

Applicants who have successfully obtained an associate's degree in the field of fire science or emergency medical services shall receive four (4) points. Applicants who successfully obtained an associate's degree in any other field shall receive two (2) points. A copy of a diploma must be included with the request for preference points as proof of the attainment of degree.

Applicants who have successfully obtained a bachelor's degree in the field of fire science or emergency medical services shall receive five (5) points. Applicants who successfully obtained a bachelor's degree in any other field shall receive three (3) points. A copy of a diploma must be included with the request for preference points as proof of the attainment of degree.

3. Residency Preference Points

Any applicant whose principal residence is located within the jurisdiction of the Troy Fire Protection District shall receive five (5) points. Proof of residency will be required by submitting documentation showing their address on one or more of the following; driver's license, rental agreement, electric bill, natural gas bill, telephone bill, or municipal sewer/water bill.

4. Additional Preference Points

- A. Any applicant who has been employed as a contract firefighter for the Troy Fire Protection District shall receive one (1) preference point for each year of service, up to a maximum of five (5) points.
- B. Any applicant who has served with the Troy Fire Protection District shall receive one (1) preference point for each year of service, up to a maximum of five (5) points.

EDUCATION

15. **CIRCLE HIGHEST GRADE COMPLETED**

GED CERTIFICATE HIGH SCHOOL COLLEGE 1 2 3 4
GRADUATE SCHOOL M.A. Ph.D. OTHER

**Name and Address of School
(Include City and State)**

Date(s) Attended

**Graduate ?
Yes No**

16. High School _____

17. Undergraduate Education _____

18. Graduate Education _____

19. Trade Schools _____

20. Paramedic School _____

21. EMT School _____

22. What college degrees have you attained? _____

23. List course work relevant to position for which you have applied: _____

MILITARY

24. Are you now or have you ever been in the military service? Yes ____ No ____

25. Branch of service _____

26. Are you now or were you ever an active member of any branch of the U.S. Military Reserve Forces or National Guard Unit? Yes _____ No _____

Rank _____

27. Unit _____ From _____ To _____

CONVICTION HISTORY

28. Have you ever been convicted of a crime other than minor traffic violations?

Yes _____ No _____

If "Yes," explain below:

DATE	POLICE AGENCY	OFFENSE	DISPOSITION OF CASE

29. List all traffic convictions and accidents you have had in the last four years. (If more room is needed, please type on a separate page and attach).

LOCATION (City-State)	APPROXIMATE DATE	VIOLATION	DISPOSITION

EMPLOYMENT HISTORY

List all jobs you have had for the last ten years. Include periods of unemployment. Put your present job first. Include military service in proper time sequence along with temporary or part-time jobs.

30. **Present employer's name:**

_____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to Present **Salary** _____ **Per** _____
month-year

31. **Employer's name** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____ **Salary** _____ **Per** _____
month-year month-year

32. **Employer's name** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____ **Salary** _____ **Per** _____
month-year month-year

33. **Employer's name** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____ **Salary** _____ **Per** _____
month-year month-year

34. **Employer's name** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____ **Salary** _____ **Per** _____
month-year month-year

35. **Employer's name** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____ **Salary** _____ **Per** _____
month-year month-year

36. **Employer's name** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____ **Salary** _____ **Per** _____
month-year month-year

37. **Employer's name** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____ **Salary** _____ **Per** _____
month-year month-year

38. Have you ever been suspended or terminated, other than from an economic layoff, from any prior employment? Yes _____ No _____ If yes, please explain:

39. Have you ever resigned from any employment position because of misconduct or unsatisfactory performance or while under investigation? Yes _____ No _____

If yes, explain: _____

40. Have you ever taken a civil service exam? Yes _____ No _____

Agency _____ Date _____ Position on List _____
Status _____

41. Are you currently on any eligibility list(s)? Yes _____ No _____

If yes, indicate position applied for, status on list and expiration date of each: _____

REFERENCES

Please list three adults not related to you and not former employers, who have known you for more than three years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality, and other qualities.

42. Name _____ Address _____
Home Phone _____ Business Phone _____
Occupation _____ Relationship _____

43. Name _____ Address _____
Home Phone _____ Business Phone _____
Occupation _____ Relationship _____

44. Name _____ Address _____
Home Phone _____ Business Phone _____
Occupation _____ Relationship _____

45. Explain your reasons for wanting to become a firefighter and/or paramedic: _____

46. Please review the enclosed job description for the position for which you are applying and state whether you can perform the essential job functions listed therein with or without reasonable accommodation.

Yes _____ No _____

47. If accommodation is needed, please explain: _____

48. Person(s) to be notified in case of emergency.

Name _____ Address _____

Phone _____ Relationship _____

Name _____ Address _____

Phone _____ Relationship _____

Name _____ Address _____

Phone _____ Relationship _____

SUBMISSION OF DOCUMENTATION AND CREDENTIALS

- 49. I understand that if I am placed on any eligibility list, I will be fingerprinted, and a set of my fingerprints will be furnished to the Illinois Department of State Police and to the Federal Bureau of Investigation.

- 50. I understand that I must provide the Board of Fire Commissioners with COPIES of the following documentation and/or certifications at the times indicated below. Other relevant fire service certificates, such as EMT-P, Firefighter II, Firefighter III, NIMS IS-700, may be submitted with the application but are not required. If at any time any of the documentation is updated or if my credentials change, I must submit the new documentation or certifications to the Commission as soon as possible. I further understand that failure to submit any of the following documentation and/or certifications at the times indicated may result in my application no longer being considered by the Commission and/or loss of my position on the eligibility list or withdrawal of a conditional offer of hire.

DOCUMENTATION

TIME OF SUBMISSION

Troy Fire Protection District Authorization Form

With this application

Copy of High School or GED diploma
(Do not send college certificates as substitutes)

With this application

Set of fingerprints

After eligibility register is created but before a conditional offer of hire

Valid driver's license

With this application

One of the following:

With this application

- Birth certificate issued by the State Department, Form FS-545
- Birth certificate issued abroad by the State Department, Form DS-1350
- Original or certified copy of a birth certificate issued by a state, county, or municipal authority, bearing a seal
- Native American tribal documents
- U.S. citizen identification card, INS Form 1-197
- Identification card for use of a resident citizen in the U.S., INS Form 1-179

I HEREBY CERTIFY THAT I HAVE READ THE ABOVE QUESTIONS AND STATEMENTS, AND I CERTIFY THAT THERE ARE NO MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS IN THIS QUESTIONNAIRE, AND THAT ALL MY ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT MISREPRESENTATIONS, OMISSIONS OR FALSIFICATIONS ON THIS QUESTIONNAIRE OR AT ANY TIME DURING THE HIRING PROCESS MAY RESULT IN MY APPLICATION NO LONGER BEING CONSIDERED OR IN TERMINATION OF MY EMPLOYMENT WITH TROY FIRE PROTECTION DISTRICT.

Dated at _____ Illinois, this _____ day of _____, 20____.

Signature in Full _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. This organization is committed to the policy of equal employment opportunity in recruitment, hiring, career advancement, and all other personnel practices. Your job related experience and other qualifications will be considered without discrimination on the grounds of race, color, religion, sex, national origin, age, or physical or mental handicap. All information provided in this application will be treated confidentially, and will be used only to help assure the best use of your abilities if you are employed with us.

Additional Requirements:

- Applicants must supply a copy of his/her Firefighter II (BOF) certification and I.D.P.H. EMT-P license with the completed application.
- Applicants are required to meet the medical standards as adopted by NFPA
- Applicants must possess a high school diploma or G.E.D.
- Return both Authorization Forms with the completed application. (Troy Fire District & CLS Enterprises of Lockport)
- CPAT certificate shall be included with completed application

