

# **POLICY: RECRUITING & EMPLOYMENT**

**Blissfield Township Fire Dept  
Standard Operating Procedures  
Policy #100**

## **I. PURPOSE**

To outline the procedures to be followed in recruiting and employment. This policy, although may be more restrictive, should be coordinated with the employment policies of Blissfield Township.

## **II. PROCEDURE**

- A. This department is an equal opportunity employer and all persons are eligible for employment without regard to race, color, creed, religion, sex or national origin. Additionally, persons employed will not be subject to discrimination, harassment, or inappropriate treatment with respect to their race, color, creed, religion, sex, national origin or disability as outlined in specific Federal and State, local laws and ordinances.
- B. The following steps shall be taken in examining an applicant's qualifications for employment.
  - 1. The applicant shall complete a written fire department application, available at the Blissfield Township Office.
  - 2. The applicant may be required to provide proof of high school graduation or GED.
  - 3. All applicants shall complete a pre-employment process established by department.
  - 4. The applicants will be screened in the following areas:
    - a) Criminal background
    - b) Drivers license

Any applicant that has accumulated more than two (2) Civil infraction moving violations or has six (6) points on their Driving Record at the time of application will not be considered for employment. Once the accumulative points have fallen below six (6) the individual may reapply for employment.

Any applicant with one (1) drug or alcohol related driving conviction within the last two (2) years, or more than one (1) drug or alcohol related driving convictions within the last five (5) years, will not be considered for employment.
  - 5. Applicants who successfully complete the initial pre-employment process may be offered a conditional offer of employment contingent upon the successful completion of the following.
    - a. A pre-employment physical examination and drug screen at a medical facility designated by Blissfield Township.
    - b. A background investigation
    - c. A driving record review

### III. CONDITIONS OF EMPLOYMENT

- A. Successfully complete the minimum required training as mandated by the Michigan Firefighter's Training Council. Pursuant to (PA 291, of 1966) as amended to date.
- B. All persons offered employment as firefighters/EMT by Blissfield Township are expected to attend 50% of all regularly scheduled training and respond to 35% of all calls for service each quarter. Failure to meet the above listed requirements without proper documentation (Leave of Absence) will result in discipline according to the discipline policy (Policy 111). Personnel are expected to keep the Fire Chief, or Designee, appraised of all the hours during which they can be expected to be available for service. Personnel must immediately notify the Fire Chief, or Designee, of times when they will be unavailable for service due to unforeseen circumstances.
- B. All firefighter/EMT personnel must participate in and successfully pass a periodic physical examination every two years or as determined by Blissfield Township.
- C. Complete a documented one year period of probation.
- D. Maintain and provide proof of all appropriate licenses: EMS with Michigan Department of Community Health, Basic Life Support for Healthcare Providers and a State of Michigan operators (driver's) license, as determined by Blissfield Township.
- E. Maintain compliance with all Blissfield Township Policies and Procedures.

### IV. CERTIFICATION REQUIREMENTS

After being hired by Blissfield Township, applicants shall take Firefighter I & II within two (2) years. Applicants shall also obtain licensure with Michigan Department of Community Health as an Emergency Medical Technician (EMT) within the first five years of membership. If applicant should fail either class, applicant agrees to reimburse Blissfield Township the cost of full tuition within one year.

I have read and understand the content of this policy.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

After completion of application, please turn into the Blissfield Township Office, 120 S. Lane Street, P.O. Box 58, Blissfield, MI 49228

**OFFICE USE ONLY**

Date application received \_\_\_\_\_ Date reviewed \_\_\_\_\_

Approved YES ( ) NO ( )

Reasons \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Notes/Restrictions \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Background check performed by: \_\_\_\_\_ Date \_\_\_\_\_

Approved by: \_\_\_\_\_ Date \_\_\_\_\_

**Attachments:**

Appendix A.....Fire Fighter and EMT Application

Appendix B.....Conditional Offer of Employment

Appendix C.....Applicant Release Form

**Standard Operating Procedures**

Policy Date: 01DEC2014

Last Revision Date: 08JAN2015

Date to Review: 08JAN2016

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**Appendix A**

**BLISSFIELD FIRE DEPARTMENT  
EMPLOYMENT APPLICATION**

DATE: \_\_\_\_\_

PLEASE PRINT

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ Social Security No. \_\_\_\_\_

City or Township \_\_\_\_\_ Driver's License No. \_\_\_\_\_

Phone No. (Home) \_\_\_\_\_ Phone No. (Work) \_\_\_\_\_

DOB \_\_\_\_\_ 18 years old or older: Y N

Firefighter Certification: Y N EMT License: Y N

Employer \_\_\_\_\_

Normal work hours \_\_\_\_\_ Agree to a physical exam? (Yes) (No)

Can you leave work? (Yes) (No) Agree to driving record check? (Yes) (No)

Work weekends? (Yes) (No) Agree to criminal history check? (Yes) (No)

Emergency contact \_\_\_\_\_ Name of physician \_\_\_\_\_

Phone No. \_\_\_\_\_ Phone No. \_\_\_\_\_

Distance from your home to your assigned station \_\_\_\_\_

The reason(s) I am applying for membership in Blissfield Fire Department:

\_\_\_\_\_  
\_\_\_\_\_

Any impairments (physical, mental, or other) that would prevent you from performing firefighter/EMT duties (Yes) (No) If "Yes" please explain:

\_\_\_\_\_  
\_\_\_\_\_

Please list previous employers. Reference: Name Phone Number

(Fire Department if Applicable)

_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list personal reference	Name	Phone Number
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_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby agree that the information provided above is accurate, and agree that Blissfield Township may verify such information including conducting background checks and obtaining a copy of my driving, criminal history and physical examination. I agree to the disclosure of such information to Blissfield Township by any agency or person and release any agencies or persons from any liability connected with such disclosures.

I further agree, if employed by Blissfield Township, I will obey all policies and procedures of Blissfield Township, the Blissfield Township Fire Department, and all applicable statues of the State of Michigan. I understand that employment with the Fire Department is at-will and may be terminated by Blissfield Township for any reason.

Applicant Signature \_\_\_\_\_

Interviewed by \_\_\_\_\_

Date \_\_\_\_\_

**CONDITIONAL OFFER OF EMPLOYMENT**

**I. PURPOSE**

The purpose of this agreement is to extend to you, the applicant, a conditional offer of employment. You must meet the below listed terms and conditions before being hired by Blissfield Township. A final offer of employment will be extended to you only after you have satisfied all the requirements established by Blissfield Township. All entering applicants for the listed position of firefighter/EMT are required to successfully comply with these same conditions.

**II. PARTIES**

This is an agreement between Blissfield Township and \_\_\_\_\_(Name)

**III. TERMS AND CONDITIONS**

A. An applicant must meet the following terms and conditions:

1. Comply with the minimum employment standards for Firefighter/EMT as established by Department Policy, referred to as, Recruiting and Employment.
2. Successfully complete the minimum required training as mandated by the Michigan Firefighter's Training Council. Pursuant to (PA 291, of 1966) as amended to date.
3. Pass a physical examination necessary to perform the essential functions of the above position pursuant to NFPA 1582 guidelines.
4. Any additional requirements specified by Blissfield Township.

**IV. LENGTH OF AGREEMENT**

This conditional offer of employment shall remain valid and in effect for 365 days or as determined by Blissfield Township from the effective date of this agreement, provided however, this offer shall be immediately withdrawn upon the applicant's failure to meet any one of the above terms and conditions. The effective date of this agreement is \_\_\_\_\_(Date).

**ACKNOWLEDGMENT**

Successful completion of these job related and necessary conditions of employment is required to carry out the essential functions of the above position. I have read and agree to abide by the CONDITIONAL OFFER OF EMPLOYMENT and agree to abide by these terms.

\_\_\_\_\_  
(Blissfield Township Representative) (Date)

\_\_\_\_\_  
(Applicant) (Date)

**Appendix C**

**APPLICANT RELEASE FORM**

I, \_\_\_\_\_, presently residing at \_\_\_\_\_  
\_\_\_\_\_ hereby apply for membership/employment with the Blissfield Township Fire Department. I have been advised and am fully aware that a representative of Blissfield Township will be conducting a thorough investigation of my background to assist in determining my suitability for this employment. I realize that while conducting this background investigation, representatives will be making inquiries of the following personal institutions and individuals: Official's and Records Offices at schools which I have attended; Physicians and/or other persons who may have examined or treated me for any physical or other type illness or injury; Police and/or Court Records with whom I may have an arrest or conviction record; Credit Bureaus and/or firms who may have information regarding my credit history, employment history, and/or financial standing: present and previous employers; and any other persons who may be able to provide information about me which Blissfield Township deems necessary.

I hereby authorize and instruct any person or institution in possession of information about me to release same to Blissfield Township. I hereby waive any privileged or right which might otherwise forbid any physician, or other person who has attended me or any other school official, court, police agency, credit bureau, employer, firm or person, from disclosing to Blissfield Township any knowledge or information they have concerning me. I further consent that Blissfield Township, the Blissfield Township Fire Chief, or his/her Designee, be provided with a copy of any such records concerning me which they may desire.

I hereby give my consent to Blissfield Township, or it's Designee, to perform a test of my blood and/or urine to determine my possible usage of illegal/prohibited substances.

I recognize the right of Blissfield Township, in its sole discretion, to treat all sources as confidential, and withhold from me and/or my agent the names of such confidential sources and information obtained there from.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date