

This Exam Packet contains the following:

Public Notice for Firefighter/Paramedic Exam

Position Description

Application

Authorization to Release Information

Proof of Residence Form

Applicant Data for Government Monitoring

Check List

FIREFIGHTER/PARAMEDIC EXAM CHECK LIST

Name _____

Completed Application _____

\$35.00 Money Order/Cashiers Check _____ Payable to City of Brook Park

ATTACH COPIES:

Signed Application _____

Valid Driver License _____ Must have **Ohio** License by Time of Appointment

Proof of Citizenship _____ (Birth Certificate, Passport, Naturalization Paper)

H.S. Diploma/GED Certificate _____

State of Ohio Paramedic (EMT-P) Certificate _____

Firefighter Level I and II Certificate _____

Physical Agility Certificate (Dated February 3, 2018 or later) _____

Release of Information Form _____

Applicant Data for Government Monitoring _____

OPTIONAL EXTRA CREDIT:

U.S. Military proof of Honorable Discharge (DD214) _____ (5%)

Residency verified by Brook Park Tax Department _____ (3%)

Two Year Associates Degree in Fire Related Field _____ (2%)

Four Year Bachelor Degree in Fire Related Field _____ (4%)

NOTE: COPIES OF DOCUMENTS CANNOT BE MADE AT CITY HALL!

PLEASE RETURN THIS FORM WITH APPLICATION.

NEWSPAPER AD

**FIREFIGHTER/PARAMEDIC
ENTRANCE EXAM
CITY OF BROOK PARK, OH**

The Civil Service Commission will conduct an examination for the position of **FIREFIGHTER/PARAMEDIC** on **February 2, 2019** at 9:30 a.m, sign-in begins at 9:00 a.m. Application packets will be available **January 14, 2019 through January 25, 2019** at Brook Park City Hall, 6161 Engle Rd. between 9:00 a.m. and 4:00 p.m., weekdays or online at cityofbrookpark.com, Civil Service. Deadline for filing is **January 25, 2019**. Questions may be directed to the Civil Service Secretary 216-433-7025.

BROOK PARK CIVIL SERVICE COMMISSION
Equal Opportunity Employer
Encouraging Women and Minorities to Apply

Plain Dealer: January 13, 2019 & January 20, 2019
Cleveland.com

**FIREFIGHTER/PARAMEDIC
ENTRANCE EXAM
CITY OF BROOK PARK, OHIO**

The Brook Park Civil Service Commission will conduct an examination for the position of **FIREFIGHTER/PARAMEDIC** on **Saturday, February 2, 2019** promptly at 9:30 a.m.; sign-in begins at 9:00 a.m. in the Brook Park Recreation Center, 17400 Holland Road, Brook Park, Ohio. Exam will consist of **firefighting and paramedic related questions only**. Salary and benefits, as covered by the current Collective Bargaining Agreement. Application forms will be available beginning **January 14, 2019** at Brook Park City Hall, 6161 Engle Rd. between 9:00 a.m. and 4:00 p.m., Monday through Friday. A non-refundable testing fee of **\$35.00** must accompany the completed application and must be in the form of a money order or cashiers check payable to the City of Brook Park. No cash or personal checks. Applications will be limited to the first 70. **Deadline for filing is January 25, 2019.**

Applicants must be a U.S. Citizen, possess a high school diploma or GED equivalent and speak, read and write English language fluently. No person shall be eligible for appointment until they have reached eighteen (18) years of age. In addition, no person shall be eligible to receive original appointment when that person is thirty-six (36) years of age or older. All eligible candidates must complete and pass the CVSA test, psychological evaluation, background investigation, personal interview and medical exam as well as the written test.

Copies of the following certifications must be returned with the application: Proof of Citizenship, Driver's License, High School Diploma/GED Certificate, State of Ohio Paramedic (EMT-P), Firefighter Level I and II. New hires may be required to join the regional technical rescue team. **NOTE: COPIES OF DOCUMENTS CANNOT BE MADE AT CITY HALL.**

The City of Brook Park requires a Firefighter's Physical Agility Test conducted at Cuyahoga Community College Western Campus, with a passing grade of four minutes or less, within one year of date of exam.

Credits will be obtained, if you possess one or more of the following:

Military (5%), (DD214) Discharge Certificate showing Honorable Discharge

Residency (3%), when proper proof of one-year current residency in the City of Brook Park is verified by the Brook Park Tax Department

Education - Bachelor (4%) or Associate's Degree (2%), from an accredited institution, in Fire Science Technology, Emergency Medical Service Technology, etc.

In order to receive credit you must have a minimum passing grade of 70% on the written exam.

Maximum combined credit 10%.

The deadline for filing applications will be **January 25, 2019 4:00 p.m.** Questions may be directed to the Civil Service Secretary 216-433-7025 between the hours of 8:30 a.m. - 12:30 p.m.

Because of the "Public Records" law in Ohio, the identity of applicants and application materials cannot be considered confidential.

BY ORDER OF THE BROOK PARK CIVIL SERVICE COMMISSION
An Equal Opportunity Employer
Encouraging Women and Minorities to Apply

POSITION DESCRIPTION

Class Title: **Firefighter/Paramedic**

Office of Public Safety

Division: Fire

Date: 08/27/2015

GENERAL PURPOSE

Protects life and property by performing emergency aid, basic and advance life support, fire fighting, technical rescue, hazardous materials, and fire education/prevention duties. Maintains emergency and rescue equipment, fire equipment, apparatus, and facilities.

SUPERVISION RECEIVED:

Works under the general supervision of Shift Lieutenants.

SUPERVISION EXERCISED

May be assigned A.O.R. (Area of Responsibility) where they will coordinate, instruct, or supervise special areas of operations or duties.

ESSENTIAL DUTIES AND RESPONSIBILITIES

Performs emergency response activities including driving emergency response vehicles; responsible for response locations and traffic control devices while providing for the safety of other vehicles, pedestrians and fire personnel.

Performs emergency aid and paramedic activities including administering basic life support, advanced life support, and other related assistance as required; provides medical care to sick or injured, including patient history, physical examination, and implementation of appropriate treatment plans in accordance with established patient care protocols.

Provides emergency ambulance transportation to area hospitals when necessary.

Performs firefighting activities including driving fire apparatus, operating pumps and related equipment, laying hose, and performing fire extinguishment and containment tasks.

Participates in fire drills, attends classes in firefighting, emergency medical, multiple casualty incidents, first-responder, paramedical, technical rescue, hazardous materials, and related subjects.

Receives and relays EMS, fire and alarm calls. Operates radio and other communication equipment. Communicates effectively with hospital emergency staff concerning patient treatment and disposition.

Accurately and appropriately documents all emergency aid activity on proper forms, and as required by law.

Properly collects and disposes of infectious waste generated at emergency scenes.

Participates in the inspection of buildings, hydrants, and other structures in fire prevention programs.

Maintains EMS and fire equipment, apparatus and facilities. Performs minor repairs to departmental equipment.

Assists in developing plans for special assignments such as emergency preparedness, hazardous communications, training programs, firefighting, hazardous materials, and emergency aid activities.

Presents programs to the community on safety, medical, and fire prevention topics.

PERIPHERAL DUTIES

Performs general maintenance work in the upkeep of station facilities and equipment; cleans and washes walls and floors; cares for grounds around station; makes minor repairs; washes, hangs and dries hose; washes, cleans, polishes, maintains and tests apparatus and equipment. Assists in department supervisory and administrative activities, as assigned.

Assists in training new employees, as assigned.

Assists in procuring and maintaining emergency medical supplies and equipment.

Performs backup duties for related positions.

Serves as a member of various employee committees, as assigned.

MINIMUM QUALIFICATIONS

Education and Experience:

- (A) High school diploma or GED equivalent;
- (B) Certification as a Paramedic,
- (C) Ohio Firefighter II certification.

Necessary Knowledge, Skills and Abilities:

(A) Working knowledge of driver safety; Extensive knowledge of first aid; Thorough knowledge of basic and advanced life support in emergency operations; Thorough knowledge of paramedical procedures and practices;

(B) Ability to operate emergency medical equipment; Ability to apply standard emergency aid, basic and advanced life support procedures; Ability to perform strenuous or peak physical effort during emergency, training or station maintenance activities for prolonged periods of time under conditions of extreme heights, intense heat, cold or smoke; Ability to maintain accurate records; Ability to act effectively in emergency and stressful situations; Ability to follow verbal and written instructions; Ability to communicate effectively orally and in writing; Ability to establish effective working relationships with employees, other agencies, and the general public; Ability to meet the special requirements listed below.

SPECIAL REQUIREMENTS:

Entry Level: (A) Must be 18 years or older at the time of employment; (B) Must possess, or be able to obtain by time of hire, a valid State driver's license without record of suspension or revocation in any State; (C) No felony convictions or disqualifying criminal histories within the past five years; (D) U.S. citizen; (E) Must be able to read and write the English language; (F) Must be of good moral character and of temperate and industrious habits.

SELECTION GUIDELINES:

Entry Level: Formal application; written examination; physical agility test; oral examination; medical examination; CVSA test, background verification and check; final selection.

TOOLS AND EQUIPMENT USED

EMS apparatus, basic and advance life support equipment, fire pumps, hoses, and other standard firefighting equipment, ladders, radio, computers, phone.

PHYSICAL DEMANDS

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is frequently required to stand; walk; use hands to finger, handle or operate objects, tools, or controls; and reach with hands and arms. The employee is occasionally required to sit; climb or balance; stoop, kneel, crouch, or crawl, and taste or smell. The employee is frequently required to talk or hear.

The employee must frequently lift and/or move up to 10 pounds and occasionally lift and/or move up to 100 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception, and the ability to adjust focus.

WORK ENVIRONMENT

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee regularly works in outside weather conditions. The employee occasionally works near moving mechanical parts and in high, precarious places and is occasionally exposed to wet and/or humid conditions, fumes or airborne particles, toxic or caustic chemicals, risk of electrical shock, and vibration.

The noise level in the work environment is usually moderate, except during certain firefighting or EMT activities when noise levels may be loud.

The duties listed above are intended only as illustrations of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related or a logical assignment to the position.

The job description does not constitute an employment agreement between the employer and employee and is subject to change by the employer as the needs of the employer and requirements of the job change.

Because of the public records law in Ohio, the identity of applicants and application materials cannot be considered confidential.

Per Civil Service Rules & Regulations, Rule VI Eligible Lists, 6. Each person on an Eligible List shall file with the Commission a written notice of any change of address. Failure to do so may be considered sufficient reason for not certifying his name to appointing authorities for future appointments.

Effective Date: 10/29/2015

Application for Employment

City of Brook Park, OH

Civil Service Commission



Michael D. Gammella, Mayor

Donna Bogar, Civil Service Secretary

6161 Engle Road Brook Park, OH 44142 216-433- Fax 216-433-0822

Personal Information

Name: _____ Date: _____

Social Security Number: _____

Home Address: _____

City, State Zip: _____

Home Phone: _____ Business Phone: _____

Cell _____ Email _____

US Citizen? _____

Position Applying For

Title: Firefighter/Paramedic Salary Desired: _____

Referred By: _____ Date Available: _____

Education

High School (Name, City, State): _____

Graduation Date: _____

Business or Technical School: _____

Dates Attended: _____ Degree, Major: _____

Undergraduate College: _____

Dates Attended: _____ Degree, Major: _____

Graduate School: _____

Dates Attended: _____ Degree, Major: _____

References

Former Employers List below the last three employers, starting with the most recent first.

Name of Present or Last Employer: _____

Address: _____

Starting Date: _____ Leaving Date: _____ Job Title: _____

Starting Salary: _____ Ending Salary: _____ May we contact your supervisor? _____

Description of Work: _____

Reason for Leaving _____

Name of Previous Employer: _____

Address: _____

Starting Date: _____ Leaving Date: _____ Job Title: _____

Starting Salary: _____ Ending Salary: _____ May we contact your supervisor? _____

Description of Work: _____

Reason for Leaving _____

Name of Previous Employer: _____

Address: _____

Starting Date: _____ Leaving Date: _____ Job Title: _____

Starting Salary: _____ Ending Salary: _____ May we contact your supervisor? _____

Description of Work: _____

Reason for Leaving _____

Do you have a valid driver's license? _____

Service Record

Branch of Service _____ Discharge Date & Rank _____

Present Membership National Guard/ Reserves _____ Date Obligation Ends _____

You must attach discharge papers or other proof of service to receive credit.

Authorization

I understand and agree that I may be required to take one or more of the following: Physical examination (including drug and alcohol screening); lie detector tests (safety forces only) as a condition of hiring or continued employment. I agree to consent to take such tests at such time designated by the City and to release the City, its Directors, officers, agents, or employees from any claim arising in connection with the use of such tests.

I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise and release all parties from all liability for any damage that may result from furnishing same to you. I also agree to have a credit check done if deemed necessary for my employment.

I understand and agree that, if hired, my employment is for no definite period of time and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice.

Date: _____

Signature: _____

Because of Ohio's Public Records Act, the identity of applicants and application materials cannot be considered confidential.

**AUTHORIZATION TO RELEASE INFORMATION
FOR EMPLOYMENT WITH THE
CITY OF BROOK PARK, DIVISION OF FIRE**

The undersigned hereby authorizes and requests release of any and all information concerning me including, but not limited to, my employment, military credit, psychological, criminal, medical, educational (including the transcript of any academic record) and any other records relating to achievement, attendance, personal history, and disciplinary records and credit records. I hereby authorize you to release this information upon request to the bearer of this document. This release is executed with full knowledge and for the City of Brook Park Division of Fire, to furnish this information as described above to third parties in the course of fulfilling its official responsibilities relative to my employment with the City of Brook Park, Division of Fire.

I hereby release you as custodian of such records and employer, educational institutions, physicians, psychologist, psychiatrist, hospital, or other repository of medical records, credit bureau, consumer reporting agency, or other military or government entity, including its officers, employee or related personnel, both individually and collectively from any and all responsibility or liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it.

I am aware that this application is a 'Public Record' and will be handled in accordance with Ohio Public Records Act. I further understand that this is an application for employment and that no employment contract is being offered.

I have read and understand the above.

Signature of Applicant

Date

Full Name (Printed)

Current Address

Social Security Number

Date of Birth

Phone Number

PROOF OF BROOK PARK RESIDENCY

*****IF YOU ARE A BROOK PARK, OHIO RESIDENT AND QUALIFY FOR RESIDENT SPECIAL CREDIT, PLEASE HAVE THE LOWER PORTION OF THIS FORM VERIFIED AT THE CITY OF BROOK PARK TAX OFFICE PRIOR TO FILING YOUR APPLICATION*****

**Release of information from City Income Tax Files to Verify Residency for _____
Civil Service Exam Special Credit. (Name)**

RULE IV, EXAMINATIONS, 6. CREDITS FOR COMPETITIVE EXAMINATIONS of the Brook Park Civil Service Commission Rules: **b. RESIDENCY CREDIT** – When proper proof of one-year current residency in the city of Brook Park is presented to the Commission (verification by Brook Park Tax Department), being otherwise eligible has received a passing grade of seventy percent (70%) in any competitive entrance examination, he or she shall be granted additional credit in an amount equal to three percent (3%) of his or her examination grade. (Rev. 11/2012)

Following to be completed in ink or typewritten

Applicant's Name Social Security Number

This is to verify my residency in the City of Brook Park, Ohio from _____ to _____. Further, this is to give permission to the City of Brook Park Civil Service Commission to obtain information from the City Income Tax files to verify my residency in the City of Brook Park as stated above. Verification of my residency for this time period will result in a three percent (3%) additional credit to my exam score of seventy percent (70%) or higher.

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THE ABOVE STATEMENT IS TRUE, CORRECT AND COMPLETE. I FURTHER UNDERSTAND THAT ANY FALSIFICATION, OMISSION OR CONCEALMENT OF MATERIAL FACT MAY RESULT IN MY DISQUALIFICATION FROM EXAMINATION, REMOVAL OF MY NAME FROM CONSIDERATION FOR A POSITION, OR DISMISSAL, IF APPOINTED, AND THAT I SHALL NOT BE PERMITTED TO MAKE FUTURE APPLICATION FOR ANY POSITION IF I MAKE ANY WILLFUL FALSE STATEMENT.

Date Applicant's Signature

APPLICANT PLEASE DO NOT WRITE BELOW THIS LINE

+++++

For City of Brook Park's Division of Taxes:

This is to verify the residency of the above applicant during the time period indicated above.

Name & Title _____

Date Signature

APPLICANT DATA FOR GOVERNMENT MONITORING

Please help us comply with government record keeping by filling out the information requested below. The data is for periodic government reporting and will be kept in a **Confidential File** separate from the Application for Employment.

PLEASE PRINT

Position Applied For: **Firefighter/Paramedic**

Date: _____

Affirmative Action Survey

Government agencies require periodic reports on the sex, ethnicity, handicapped and veteran status of applicants. This data is for analysis and affirmative action only. Submission of information is voluntary. If you choose not to furnish it, under federal regulations, this employer is required to note race and sex on the basis of visual observation or surname.

I wish to furnish this information_____

I do not wish to furnish this information_____

Name_____

Female _____

Male _____

- ___ **WHITE:** All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.
- ___ **BLACK/AFRICAN AMERICAN:** All persons having origins in any of the Black racial groups of Africa.
- ___ **HISPANIC/LATINO:** All persons of Mexican, Puerto Rican, Cuban, Central or South America or other Spanish culture of origin, regardless of race.
- ___ **ASIAN:** All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent (for example China, Japan, Korea, India).
- ___ **NATIVE HAWAIIAN/PACIFIC ISLANDER:** All persons having origins in any of the original peoples of the Hawaiian Islands and Pacific Islands (for example Hawaii, Philippine Islands and Samoa).
- ___ **AMERICAN INDIAN/ALASKAN NATIVE:** All persons having origins in any of the original peoples of North America who maintain cultural identification through tribal affiliation or community recognition.
- ___ **OTHER:** Please self define_____

Please check if any of the following are applicable:

___ **VETERAN ELIGIBILITY:** Served in armed forces.

___ **DISABLED VETERAN:** A person whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty.

___ **HANDICAPPED INDIVIDUAL:** Any person who (1) has a physical or mental impairment that substantially limits one or more of his/her major life activities; (2) has a record of such impairment; (3) is regarded as having such an impairment. A handicap is "substantially limiting" if it is likely to cause difficulty in securing, retaining or advancing in employment.

