



Deseronto Fire Department
316 Edmon St.
Deseronto, ON
K0K 1X0
Hall phone: 396 - 2325

Application for:
The Deseronto Fire Department Firefighter Trainee Program

Name: _____

Address: _____, Deseronto, Ontario.

Are you between the ages of 18 and 64 years of age? Yes () No ()

Present Employer: _____

Work Address: _____

Phone Number: _____

Number of Years: _____

Previous Employer: _____

Work Address: _____

Phone Number: _____

Number of Years: _____

Highest level of Education completed: _____

Degrees or Diplomas Obtained: _____

From which educational institution: _____

Trade Apprenticeship (registered): _____

Trade licenses/certifications: _____

Please read and answer the questions on the following page and sign at the bottom.

Applicant Questionnaire

| | <u>Yes</u> | <u>NO</u> |
|---|-------------------|------------------|
| Do you possess a valid Class G Ontario Driver's License? | () | () |
| Do you have a clear criminal record? | () | () |
| Do you work shift work? | () | () |
| Do you own a personal vehicle? | () | () |
| If not, do you have reasonable access to one? | () | () |
| Are you capable of work under extreme hot/cold conditions? | () | () |
| Are you aware this program will be physically strenuous? | () | () |
| If accepted, are you willing to take the department physical form to your family physician and cover the costs incurred ? | () | () |
| Are you able to attend training sessions held on Monday evenings between the hours of 18:30 and 20:30 hrs ? | () | () |
| Are you a resident of the Town of Deseronto ? | () | () |
| Do you have any degree of claustrophobia ? | () | () |

