



Application Process
Information Packet
ENTRY-LEVEL FIREFIGHTER / EMT
for the
Chatham Community Fire Protection District

Please read the following information carefully and completely.

Dear Candidate:

Thank you for your interest in the Chatham Community Fire Protection District. It is the responsibility of each candidate to read, know, and understand the contents of this application packet and the application process.

Candidates must provide two (2) forms of valid identification, of which, one (1) must be valid state photo identification, in order to participate in all of the steps of our application process.

This is entirely the responsibility of each candidate. Failure of a candidate to possess and show staff a valid state picture ID will lead to elimination from participating in the application process.

Process:

- (1) The Application period begins **September 20, 2023 at 8:00am.**
- (2) **Applications must** be received by the Board of Fire Commissioners at the Chatham Fire Department located at # 1 Fireman Square, Chatham, Illinois 62629-1378, no later than **November 17, 2023 by 4:00 p.m. No application will be accepted after this date and time for this process.** For all inquiries, you may reach the Board of Fire Commissioners at telephone (217) 483-2121; fax (217) 483-4411; e-mail: district.office@cf-d-il.com.
- (3) The Chatham Community Fire Protection District Board of Fire Commissioners will screen applications at their regularly scheduled meeting on **November 21, 2023**, using all available information provided by candidates. Each candidate will receive written notice as to whether they will be continuing in the application process to the **Mandatory Orientation**. All decisions by the Board are final.

- (4) A valid **Candidate Physical Abilities Test (CPAT) card** including confirmation of the successful completion of the Ladder Climb test is required for Entry-level Firefighter / EMT testing with the Chatham Community Fire Protection District. CPAT is the term used to describe a Pass / Fail, physical ability test developed by the International Association of Firefighters and the International Association of Fire Chiefs. As a standardized test, it has become a method of assisting fire departments in recruiting those who are physically capable of performing the tasks associated with firefighting. It is a reliable measure of the candidate's ability to carry out fire scene activities. The tasks include:

- a. Stair Climb
- b. Equipment Carry
- c. Hose Drag
- d. Forcible Entry
- e. Search
- f. Ladder Climb / Extension
- g. Rescue Drag
- h. Ceiling Breach and Pull

This process can take up to eight (8) weeks to complete and the candidate is responsible for the cost to obtain a CPAT card, which is valid for one year from date of issue. There are several locations to take the CPAT and all have orientation sessions, station practice sessions, timed course practices, CPAT course tests and even Open Test Challenges. **NOTE: The Chatham Community Fire Protection District does not coordinate CPAT testing.**

- a. Here is a link for the Central Illinois Fire Chiefs Association schedule:
<http://centralillinoisfirechiefs.com/CPAT/CPATSchedule.aspx>. Email any questions at IllinoisCPAT@gmail.com.
- b. Here is a link for the Northeastern Illinois Public Safety Training Academy (NIPSTA):
<http://www.nipsta.org/227/Candidate-Funded-CPAT>, or you may contact them at (847) 998-8090. Note: They offer a link to a downloadable Preparation Guide and an Instructional Video and that may be useful to a candidate.
- c. Here is a link for the Southwestern United Fire District (SUFD) 2017 schedule:
<http://sufd.org/> or you may contact them at (708) 879-2064 or by email at cpat@sufd.org.

- (5) It is required for the **CPAT card** to have been issued within the last 12 months prior the date of the **Mandatory Orientation Session on December 1, 2023. Failure to present a CPAT card will result in elimination from the process.**
- (6) The **Mandatory Orientation Session** will be held on **December 1, 2023 at 5:00 p.m. to 7:00 pm.** at the Chatham Fire Department located at # 1 Fireman Square, Chatham, Illinois 62629. Two guests are allowed besides the candidate. The location is subject to change and notification of a change will be done by U.S. mail. **Failure to attend will result in elimination from the process.**

- (7) The **Mandatory Written Examination** will be held on **December 2, 2023 at 9:00 a.m.** at the Chatham Fire Department located at # 1 Fireman Square, Chatham, Illinois. The location is subject to change and notification of a change will be made by mail. **Failure to attend will result in elimination from the process.** The Board of Fire Commissioners has set the Written Examination to be 70% of the overall testing score for a candidate and the Oral Interview to be 30% of the overall testing score for the candidate.
- (8) **Successful Candidates will be notified for Mandatory Oral Interviews** after **December 7, 2023.** Interviews will be conducted at the Chatham Fire Department, #1 Fireman Square, Chatham, Illinois the week of **December 11, 2023.** Candidates will be notified of interview time by phone and through United States mail. The Board of Fire Commissioners reserves the right to reschedule Oral Interviews with proper notice, dependent upon the volume of candidates. **Failure to attend will result in elimination from the process.**
- (9) The Chatham Community Fire Protection District Board of Fire Commissioners will post the **Preliminary Eligibility Roster** after **December 15, 2023** using all available information. Each candidate will receive written notice as to whether they will be continuing in the application process to the Oral Interviews. Each candidate will receive a copy of the Preliminary Eligibility Roster after the Board of Fire Commissioners certifies it. All decisions by the Board are final.
- (10) The Chatham Community Fire Protection District Board of Fire Commissioners will hand out notices to all candidates completing the Oral Interview process requesting the candidates submit requests for **Additional Preference Points. The Additional Preference Point timeline begins on December 16, 2023 and ends on December 27, 2023 at 4:00 pm. Requests must be delivered to the Chatham Community Fire Protection District Office.**
- (11) The Chatham Community Fire Protection District Board of Fire Commissioners will post the Final Eligibility Roster after their regular meeting on **December 28, 2023,** using all available information. Each candidate will receive a copy of the Final Eligibility Roster after the Board of Fire Commissioners certifies it. All decisions by the Board are final.

IMPORTANT

The Chatham Community Fire Protection District Board of Fire Commissioners reserves the right to perform Drug Screening, Background Investigations, Fingerprinting, Psychological Examinations, and Pre-Hire Physical Examinations. Drug Screening, Background Investigations, Fingerprinting, Psychological Examinations, and Pre-Hire Physical Examinations may be completed for those candidates selected from the Final Eligibility Roster to continue the selection process.

Chatham Fire Department Application Checklist

1. Chatham Fire Department Firefighter-EMT application period begins September 20, 2023 and ends no later than 4:00 pm November 17, 2023
 - a. No applications will be accepted late
2. Items that **MUST** be turned in by 4:00 pm November 17, 2023
 - a. Completed, Signed application
 - b. A copy of your birth certificate
 - c. A copy of your high school diploma or GED certificate
 - d. A copy of your **VALID** driver's license
 - i. Maintaining a valid driver's license is a condition of permanent post-probationary employment
 - e. The following **Signed** forms **MUST** be turned in with your application
 - i. the *Authorization for Employment Verification* form
 1. The District may obtain information regarding employment, character, experience, and qualifications for employment
 - ii. the *Authorization For Release of Personal Information And Background Check* form
 1. The District may review all records as provided in the authorization
 - iii. The *Residency Requirements Understanding* form
 1. Maintaining a residency inside the District is a condition of permanent post-probationary employment
 - iv. the *Paramedic Licensure Understanding* form
 1. Obtaining and maintaining this license (EMT-P) is a condition of permanent post-probationary employment
 - v. the *Advanced Cardiovascular Life Support Understanding* form
 1. Maintaining a current card is a condition of permanent post-probationary employment
 - vi. the *Prehospital Trauma Life Support Understanding* form
 1. Maintaining a current card is a condition of permanent post-probationary employment
 - vii. the *Pediatric Advanced Life Support Understanding* form
 1. Maintaining a current card is a condition of permanent post-probationary employment
 - viii. the *American Heart Association Healthcare Provider CPR Understanding* form
 1. Maintaining a current card is a condition of permanent post-probationary employment

ix. *the Office of the Illinois State Fire Marshal (OSFM) Understanding Form*

1. *Obtaining the Office of the Illinois State Fire Marshal (OSFM) Basic Operations Firefighter certification or a Basic Operations Firefighter course completion record is a condition of permanent post-probationary employment*

3. Items that may be turned in with your application

- a. A copy of your current Illinois Department of Public Health Emergency Medical Technician - Paramedic, Emergency Medical Technician-Intermediate, or Emergency Technician- Basic license
- b. A copy of your current Advanced Cardiovascular Life Support (ACLS) card; EMT- Intermediate or Paramedic only
- c. A copy of your current Prehospital Trauma Life Support (PHTLS) card; EMT-Intermediate or Paramedic only
- d. A copy of your current Pediatric Advanced Life Support (PALS) card; EMT-Intermediate or Paramedic only
- e. A copy of your current American Heart Association Healthcare Provider CPR card
- f. If relevant:
 - i. a copy of your College or University Degree
 - ii. a copy of your Military Service Record, and/or Discharge Papers (DD214)
 - iii. a copy of one of the following:
 - 1. an Office of the Illinois State Fire Marshal (OSFM) Firefighter II certification; or
 - 2. an Office of the Illinois State Fire Marshal (OSFM) Basic Operations Firefighter course completion record; or
 - 3. an Office of the Illinois State Fire Marshal (OSFM) Basic Operations Firefighter certification.

4. You **MUST** furnish by the date of the Mandatory Orientation Session December 1, 2023

- a. a valid Candidate Physical Abilities Test (CPAT) card.

5. Other employment conditions

- a. To be hired as a probationary Firefighter- EMT you **MUST** be licensed at a minimum as an EMT-B by the Illinois Department of Health
- b. must have no felony convictions or certain misdemeanors (criminal offenses 720 ILCS 5/ Criminal Code of 1961)

- c. must have no offensive and/or inappropriate visible tattoos. Refer to Chatham Community Fire Department Operating Guideline 608, Personal Grooming Standards, which is located on our website
- d. must have vision correctable to 20/20 with no monochromatic color blindness
- e. must be a U.S. Citizen
- f. must be between 21 and 34 years of age at the time of application:
 - i. In accordance with Section 16.06b of the Illinois Fire Protection District Act (70 ILCS 705/16.06b) persons who are 35 years of age or older are generally not eligible to take an examination for a position as a firefighter with the Chatham Community Fire Protection District unless the person has had previous employment status as a firefighter in the regularly constituted fire department of the Chatham Community Fire Protection District or comes within one of the following statutory exceptions to the age 35 requirement:
 - ii. any person previously employed as a full-time firefighter in a regularly constituted fire department of (i) any municipality or fire protection district located in Illinois, (ii) a fire protection district whose obligations were assumed by a municipality under Section 21 of the Fire Protection District Act (70 ILCS 705/21), or (iii) a municipality whose obligations were taken over by a fire protection district, or
 - iii. any person who has served a fire district as a regularly enrolled volunteer, paid-on-call, or part-time firefighter for the 5 years immediately preceding the time that the district begins to use full-time firefighters to provide all or part of its fire protection service; or
 - iv. any person who turned 35 while serving as a member of the active or reserve components of any of the branches of the Armed Forces of the United States or the National Guard of any state, whose service was characterized as honorable or under honorable, if separated from the military, and is currently under the age of 40 is eligible to take the examination for the position of firefighter with the Chatham Community Fire Protection District.

Evidence of licenses and certifications must be submitted with your application. You must understand that you may be asked to attend a mandatory orientation session, a written exam, an oral interview, a drug screening, background investigation, fingerprinting, psychological exam, and a pre-hire physical examination prior to appointment to a position with the Chatham Community Fire Protection District. Failure to abide by these requirements may result in removal from the application process.

Candidate Employment Policies

Residency Policy

The Chatham Community Fire Protection District requires that all candidates for examination must be citizens of the United States. The District also requires that all employees of the District establish residency within the boundaries of the District within one year from their date of employment. All employees are required to reside within the boundaries of the District as a condition of their continued employment with the District. Any employee having extraordinary reasons or circumstances may be allowed to temporarily move out of the District with the prior approval of the Board of Trustees. Under no circumstances shall an employee be granted the right to reside outside the District for a period of more than six months, except during an employee's initial probationary period.

Equal Opportunity Employer

We consider candidates for all positions, and we encourage and foster the employment, compensation, promotion, and other conditions of employment, of all properly qualified persons without regard to race, color, religion, sex, sexual orientation, marital status, ancestry, national origin, age, disability, matriculation, political opinion or affiliation, or unfavorable discharge from military service. The Chatham Community Fire Protection District is an equal opportunity employer.

Nepotism Policy

Under the Chatham Community Fire Protection District's Nepotism Policy, candidates cannot be placed into a position where a first cousin relative or closer, whether from blood or marriage, would be assigned to the same shift as a co-worker or shift officer.

Personal Employee Conduct

The Chatham Community Fire Protection District intends to maintain a professional, customer-friendly work environment for all employees. As such, employees must exercise courtesy, discretion, and a commitment to service excellence regarding all matters of District's business and contact with our citizens, customers, and all others with whom we come into contact. Employees should also refrain from any action that might reflect adversely upon the Chatham Community Fire Protection District. Employees are viewed by the public as representatives of the Chatham Community Fire Protection District and shall be expected to act as such. Employees are also expected to treat each other in the same manner.

Chatham Community Fire Protection District employees are expected to comply with all laws, ordinances, directives, personnel policies, and practices of the District. Employees should conduct themselves in a positive manner that promotes the Chatham Community Fire Protection District, on duty and off. They should act to promote the most efficient operation of their department, the performance of their duties, and the health and safety of themselves, their co-workers, and the public. Any employee who violates federal, state, or local laws must promptly notify his or her supervisor.

Personnel Policies, Directives, and Practices

It is the purpose of Personnel Policies, Directives, and Practices to establish the usual procedures that will serve as a guide to administrative action concerning the various personnel activities and transactions. They are intended to indicate the customary and the most reasonable methods whereby the aims of the personnel program can be carried out. *These policies, directives, and practices are not to be considered as establishing a contract of employment, nor are they to be considered as establishing property rights. The Chatham Community Fire Protection District has the authority and discretion to waive application of these policies, directives, and practices in any instance.*

DID YOU DO THIS?

It is the candidate's responsibility to ensure that the entire application is complete, and all required forms are submitted with the application package.

Pay special attention to items that require a signature or must be dated.

Please place the items you are submitting in the order listed below. Any additional items you wish to submit should be placed in order after these documents.

1. Did you fully complete your *application, sign, and date*?
2. Did you provide a copy of your *birth certificate*?
3. Did you provide a copy of your *high school diploma or GED certificate*?
4. If relevant, did you provide a copy of your *college degree*?
5. If relevant, for military service, did you provide a copy of your *DD214*?
6. Did you provide a copy of your *driver's license*?
7. If applicable: Did you provide a copy of your *Illinois Department of Public Health Emergency Medical Technician – Paramedic license*?
8. If available at the time of application, did you provide a copy of your valid *Candidate Physical Abilities Test (CPAT) card*?
9. Did you and your witness sign and date the *Authorization for Employment Verification* form and attach it to your application?
10. Did you sign and date the *Authorization For Release Of Personal Information and Background Check* form and attach it to your application?
11. Did you and your witness sign and date the *Residency Requirements Understanding* form and attach it to your application?
12. Did you sign and date the *Paramedic Licensure Understanding* form and attach it to your application?

Additional Questions on Next Page →

13. Did you sign and date the *Advanced Cardiovascular Life Support Card Understanding* form and attach it to your application?
14. Did you provide a copy of your *Advanced Cardiovascular Life Support (ACLS)* card?
15. Did you sign and date the *Prehospital Trauma Life Support Card Understanding* form and attach it to your application?
16. If applicable: Did you provide a copy of your *Prehospital Trauma Life Support (PHTLS)* card?
17. If applicable: Did you sign and date the *Pediatric Advanced Life Support Card Understanding* form and attach it to your application?
18. If applicable: Did you provide a copy of your *Pediatric Advanced Life Support (PALS)* card?
19. If applicable: Did you sign and date the *American Heart Association Healthcare Provider CPR Card Understanding* form and attach it to your application?
20. If applicable: Did you provide a copy of your *American Heart Association Healthcare Provider CPR* card?
21. Did you sign and date the *Office of the Illinois State Fire Marshal (OSFM) Understanding Form* and attach it to your application?
22. If relevant, did you provide a copy of your *Office of the Illinois State Fire Marshal (OSFM) Basic Operations Firefighter or Firefighter II* certification?



APPLICATION FOR EMPLOYMENT

CHATHAM COMMUNITY FIRE PROTECTION DISTRICT

CHATHAM, ILLINOIS

We consider candidates for all positions, and we encourage and foster the employment, compensation, promotion, and other conditions of employment, of all properly qualified persons without regard to race, color, religion, sex, sexual orientation, marital status, ancestry, national origin, age, disability, matriculation, political opinion or affiliation, or unfavorable discharge from military service. The Chatham Community Fire Protection District is an equal opportunity employer.

The Chatham Fire Department, Board of Fire Commissioners is located at # 1 Fireman Square, Chatham, Illinois 62629-1378. Telephone (217) 483-2121; Fax (217) 483-4411; E-mail: district.office@cf-d-il.com

SPECIAL NOTE

Candidates must provide two (2) forms of valid identification, of which, one (1) must be photo identification, in order to participate in all of the steps in our selection process. This is entirely the responsibility of each candidate. Failure of a candidate to possess and show staff a valid picture ID will lead to elimination from participating in the selection process.

IMPORTANT NOTICE

Because your ability to complete this document as requested will be evaluated and used as one basis for employment decisions, it is essential that you read and clearly understand the form. Any questions unanswered, incomplete, or omitted questions may result in rejection of your application. Additionally, any false statements and /or deliberately evasive answers will be grounds for rejection of this application or your dismissal at a later date.

How did you find out about this position? Please identify the applicable type and indicate the name of source.

- | | |
|--|---|
| <input type="checkbox"/> Newspaper _____ | <input type="checkbox"/> Radio _____ |
| <input type="checkbox"/> Website _____ | <input type="checkbox"/> LED Sign _____ |
| <input type="checkbox"/> Friend _____ | |
| <input type="checkbox"/> Other _____ | |

POSITION APPLIED FOR: _____

(Failure to specify a job title for the "POSITION APPLIED FOR" may result in the disqualification of this application.)

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity within 3 days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

Are you either a U. S. citizen or an alien authorized to work in the United States?

Yes ☐ No ☐

Personal Information (You *MUST* notify the Board of Fire Commissioners of any change to this information.)

Candidate's Full Name (Last, First, Middle)				
Present Address	Street	City	State	Zip
Email Address			Telephone Number Day Evening	
You must be at least 21 years of age to apply. Are you 21 years of age or older? Yes <input type="checkbox"/> No <input type="checkbox"/>		Have you ever applied with the Chatham Community Fire Protection District before? If yes, when and for what position? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Do you have any relatives working for the Chatham Fire Department? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, state your relationship and the name of the individual _____				
Do you possess a valid Illinois State driver's license? Yes <input type="checkbox"/> No <input type="checkbox"/> If not, do you possess a valid driver's license from another state? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, which state? _____				
Do you possess a valid Illinois State Commercial driver's license? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Military Service (Please supply copy of your DD214 or other applicable discharge paperwork) Yes <input type="checkbox"/> No <input type="checkbox"/>				
Are you able to perform the essential functions of the position for which you are applying? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, will you be able to perform the function with accommodations? Explain. Yes <input type="checkbox"/> No <input type="checkbox"/>				
Have you ever been convicted of a felony or any misdemeanor involving moral turpitude? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, what were you convicted of and when? (In compliance with Public Act 100-285, applicants are notified that they are not required or obligated to disclose expunged juvenile records of adjudication or arrest or to disclose if they have had a juvenile record expunged.)				

Education

School	City / State	Number of Years Attended	Month / Year Graduated	Subjects Studied or Degree Attained
High School Name / GED		1 2 3 4		
Trade, Business, or Correspondence School		1 2 3 4		
College (Undergraduate)		1 2 3 4		
College (Graduate)		1 2 3 4		
Other		1 2 3 4		

Professional Licenses / Certifications

[illegible]

Previous Experience

List most recent position first, then next recent, etc. (include all part-time and military experience) for the past 10 years.

Employer / Business name			Telephone Number		
Address		Street	City	State	Zip
Job Title		Supervisor's Name and Title			
Dates of Employment			Hours Worked Each Week		
From:			To:		
Describe duties (Be specific, include equipment operated and supervisory responsibilities, if any.)					
Reason for Leaving			May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>		

Employer / Business name			Telephone Number		
Address		Street	City	State	Zip
Job Title		Supervisor's Name and Title			
Dates of Employment			Hours Worked Each Week		
From:			To:		
Describe duties (Be specific, include equipment operated and supervisory responsibilities, if any.)					
Reason for Leaving			May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>		

Employer / Business name			Telephone Number		
Address		Street	City	State	Zip
Job Title		Supervisor's Name and Title			
Dates of Employment			Hours Worked Each Week		
From:			To:		
Describe duties (Be specific, include equipment operated and supervisory responsibilities, if any.)					
Reason for Leaving			May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>		

Employer / Business name			Telephone Number		
Address		Street	City	State	Zip
Job Title		Supervisor's Name and Title			
Dates of Employment			Hours Worked Each Week		
From:			To:		
Describe duties (Be specific, include equipment operated and supervisory responsibilities, if any.)					
Reason for Leaving			May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>		

Employer / Business name		Telephone Number	
Address	Street	City	State Zip
Job Title		Supervisor's Name and Title	
Dates of Employment From: To:		Hours Worked Each Week	
Describe duties (Be specific, include equipment operated and supervisory responsibilities, if any.)			
Reason for Leaving		May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Employer / Business name		Telephone Number	
Address	Street	City	State Zip
Job Title		Supervisor's Name and Title	
Dates of Employment From: To:		Hours Worked Each Week	
Describe duties (Be specific, include equipment operated and supervisory responsibilities, if any.)			
Reason for Leaving		May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	

References

Please list references (not relatives or employers) to contact who are acquainted with you, whom you have known for at least one year.

Name	Address	Telephone Number	Years Acquainted

Acknowledgement of Statements

(Please read carefully. Sign and date.)

I certify that the answers given by me in this application are true and correct without omissions of any kind. I understand that any misleading or incorrect statements may render this application void. If I am employed and it is subsequently discovered that any answer given by me is incomplete, misleading, or incorrect, I may be terminated. I agree that the Chatham Community Fire Protection District and the Chatham Community Fire Protection District Board of Fire Commissioners shall not be held liable in any respect if my employment is terminated because of false, incomplete, or misleading statements, answers or omissions made by me in this application.

I further understand that I may be asked to attend a mandatory orientation session, a written exam, an oral interview, a drug screening, background investigation, psychological exam, and a pre-hire physical examination prior to appointment to a position with the Chatham Community Fire Protection District. Refusal to participate will result in the withdrawal of any offer of employment.

Candidate Printed Name

Candidate Signature

Date

READ THE FOLLOWING CAREFULLY BEFORE SIGNING

DO NOT WRITE BELOW THIS LINE

APPLICATION RECEIVED BY: _____ DATE: _____

Revision Date: 06/22/2022

AUTHORIZATION FOR EMPLOYMENT VERIFICATION

I also authorize pertinent companies, schools, agencies, municipalities or persons to give to the Chatham Community Fire Protection District and the Chatham Community Fire Protection District Board of Fire Commissioners any information requested regarding my employment, character, experience and qualifications and/or suitability for employment with the Chatham Community Fire Protection District and the Chatham Community Fire Protection District Board of Fire Commissioners including a check of my fingerprints and police record for the purpose of considering my suitability for hire. I hereby forever release, discharge, and covenant not to sue any person or organization for any result of providing, obtaining, or acting upon such information. I understand that such information is sought with confidentiality and will not be released to me in any form whatsoever.

In addition, a copy of this authorization is as valid as the original and should be recognized as such.

Candidate Printed Name

Candidate Signature

Date

Witness Printed Name

Witness Signature

Date

RETURN THIS FORM WITH YOUR COMPLETED APPLICATION

AUTHORIZATION FOR RELEASE
OF
PERSONAL INFORMATION AND BACKGROUND CHECK

For use by authorized personnel of the Chatham Community Fire Protection District

I, _____, do hereby authorize a review of and full disclosure of all records concerning myself to and duly authorized personnel of the Chatham Community Fire Protection District, Chatham, Illinois, whether said records are of public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of records of educational institutions; financial or credit institutions, including records of loans, the records of commercial or retail credit agencies (including credit reports and/or ratings); and other financial statements and records wherever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veteran's background reports, efficiency ratings, complaints or grievances filed by or against me and the records and recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest. I further authorize the Chatham Community Fire Protection District to obtain information from the Illinois State Police, the Federal Bureau of Investigation, the Illinois Secretary of State, or any other federal, state, or local police or other agency regarding me in order to perform a criminal history/arrest record/driving record and background check.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment with the Chatham Community Fire Protection District. I also certify that any person(s), who may furnish such information concerning me, shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability, which may be incurred as a result of furnishing such information.

I further release the Chatham Community Fire Protection District from any and all liability which may be incurred as a result of collecting such information. I understand, however,

that I am not required or obligated to disclose expunged juvenile records of adjudication or arrest or to disclose if I have had a juvenile record expunged. I acknowledge receipt of a copy of “A Summary of Your Rights Under the Fair Credit Reporting Act.”

I also understand this authorization to furnish information is executed in consideration of my participation in the Chatham Community Fire Protection District’s employment eligibility examination process.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

I have read and fully understand the contents of this “Authorization for Release of Personal Information”.

Witness

Signature (include maiden name)

Date

Address

Phone

Date of Birth

Social Security Number

Drivers License Number

RETURN THIS FORM WITH YOUR COMPLETED APPLICATION

Revision Date: 06/22/2022

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report
 - you are the victim of identity theft and place a fraud alert in your file
 - your file contains inaccurate information as a result of fraud
 - you are on public assistance
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer’s credit file. Upon seeing a fraud alert display on a consumer’s credit file, a business is required to take steps to verify the consumer’s identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active-duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552</p> <p>b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches, and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357</p>

RESIDENCY REQUIREMENTS UNDERSTANDING

(Sign and date one of the following statements)

A. FOR CANDIDATES LIVING WITHIN THE SPECIFIED AREA:

I understand that, as one of the conditions of my employment with the Chatham Community Fire Protection District, I shall maintain my residence within the specified boundaries of the District during my employment with the Chatham Community Fire Protection District. Furthermore, I understand that I am to keep my supervisor informed and shall advise, in writing, of all changes of my residence. I further understand that if I should move outside the specified boundaries, contrary to the established Rules and Regulations of the Chatham Community Fire Protection District and the Chatham Community Fire Protection District Board of Fire Commissioners, my position will be vacated, and I will be deemed to have resigned employment with the Chatham Community Fire Protection District.

Candidate Printed Name

Candidate Signature

Date

Witness Printed Name

Witness Signature

Date

B. FOR CANDIDATES LIVING OUTSIDE THE SPECIFIED AREA:

I understand that, as one of the conditions of my employment with the Chatham Community Fire Protection District, I must establish residence within the specified boundaries of the District within one year from my date of employment. Furthermore, I understand that I am to keep my supervisor informed and shall advise, in writing, of all changes of my residence. I further understand that if I should move outside the specified boundaries, contrary to the established Rules and Regulations of the Chatham Community Fire Protection District and the Chatham Community Fire Protection District Board of Fire Commissioners, my position will be vacated, and I will be deemed to have resigned employment with the Chatham Community Fire Protection District.

Candidate Printed Name

Candidate Signature

Date

Witness Printed Name

Witness Signature

Date

RETURN THIS FORM WITH YOUR COMPLETED APPLICATION

Revision Date: 04/02/2012

**EMT-B, EMT-I (Advanced), or EMT-P (Paramedic) Hiring
Requirement**

I am aware that I must be licensed as an EMT-B or higher for an original probationary appointment with the Chatham Fire Protection District. I certify that I am:

- ☐ I am licensed as an EMT-B, EMT-I (Advanced), or EMT-P (Paramedic) by the State of Illinois, and I have enclosed a copy of my license with this application.

- ☐ I understand that the Chatham Fire Protection District can skip to a qualified person in the event I have not met the qualifications for probationary Firefighter-EMT hiring.

Candidate Printed Name

Candidate Signature

Date

RETURN THIS FORM WITH YOUR COMPLETED APPLICATION

PARAMEDIC LICENSURE UNDERSTANDING

I understand that a Paramedic license is a condition of permanent post-probationary employment with the Chatham Community Fire Protection District; and I certify that:

☐

I am a licensed Paramedic by the State of Illinois and I have enclosed a copy of my license with this application. OR

I am aware that licensure as an EMT-P (Paramedic) within 24 months of original hire by the state of Illinois is a mandatory requirement. I further understand that post probationary employment with the Chatham Fire Protection District depends upon my successful licensure by the Illinois Department of Public Health as an Emergency Medical Technician- P (Paramedic) within 24 months of first hire.

Candidate Printed Name

Candidate Signature

Date

RETURN THIS FORM WITH YOUR COMPLETED APPLICATION

Revision Date: 08/01/2016

ADVANCED CARDIOVASCULAR LIFE SUPPORT CARD UNDERSTANDING

I understand that an Advanced Care Life Support (ACLS) Card is a condition of permanent post-probationary employment with the Chatham Community Fire Protection District; and I certify that:

☐ I have an Advanced Cardiovascular Life Support (ACLS) Card and I have enclosed a copy of my card with this application. OR

I will obtain and maintain an Advanced Cardiovascular Life Support (ACLS) Card after licensure as an Emergency Medical Technician-Paramedic.

Candidate Printed Name

Candidate Signature

Date

RETURN THIS FORM WITH YOUR COMPLETED APPLICATION

Revision Date: 08/01/2016

PREHOSPITAL TRAUMA LIFE SUPPORT CARD UNDERSTANDING

I understand that a Prehospital Trauma Life Support (PHTLS) Card is a condition of permanent post-probationary employment with the Chatham Community Fire Protection District; and I certify that:

- ☐ I have a Prehospital Trauma Life Support (PHTLS) Card and I have enclosed a copy of my card with this application. OR
- I will obtain and maintain a Prehospital Trauma Life Support (PHTLS) card after licensure as an Emergency Medical Technician- Paramedic.

Candidate Printed Name

Candidate Signature

Date

RETURN THIS FORM WITH YOUR COMPLETED APPLICATION

Revision Date: 08/01/2016

PEDIATRIC ADVANCED LIFE SUPPORT CARD UNDERSTANDING

I understand that a Pediatric Advanced Life Support (PALS) Card is a condition of permanent post-probationary employment with the Chatham Community Fire Protection District; and I certify that:

- ☐ I have a Pediatric Advanced Life Support (PALS) Card and I have enclosed a copy of my card with this application. OR
- I will obtain and maintain a Pediatric Advanced Life Support (PALS) Card after licensure as an Emergency Medical Technician- Paramedic.

Candidate Printed Name

Candidate Signature

Date

RETURN THIS FORM WITH YOUR COMPLETED APPLICATION

Revision Date: 08/01/2016

AMERICAN HEART ASSOCIATION CPR CARD UNDERSTANDING

I understand that an American Heart Association Healthcare Provider CPR Card is a condition of permanent post-probationary employment with the Chatham Community Fire Protection District; and I certify that:

☐ I have an American Heart Association Healthcare Provider CPR card and I have enclosed a copy of my card with this application.

Candidate Printed Name

Candidate Signature

Date

RETURN THIS FORM WITH YOUR COMPLETED APPLICATION

Revision Date: 08/01/2016

OFFICE OF THE ILLINOIS STATE FIRE MARSHAL (OSFM) UNDERSTANDING FORM

I understand that an Office of the Illinois State Fire Marshal (OSFM) Firefighter II certification or an Office of the Illinois State Fire Marshal (OSFM) Basic Operations Firefighter course completion record or an Office of the Illinois State Fire Marshal (OSFM) Basic Operations Firefighter certification is a condition of permanent post-probationary employment with the Chatham Community Fire Protection District; and I certify that:

☐ 1. I am an Office of the Illinois State Fire Marshal (OSFM) Firefighter II and have enclosed a copy of my certification with this application OR

☐ 2. I am an Office of the Illinois State Fire Marshal (OSFM) Basic Operations Firefighter and have enclosed a copy of my certification with this application OR

☐ 3. I have an Office of the Illinois State Fire Marshal (OSFM) Basic Operations Firefighter course completion record and have enclosed a copy of my record with this application OR

☐ 4. I am not currently an Office of the Illinois State Fire Marshal (OSFM) Firefighter II or an Office of the Illinois State Fire Marshal (OSFM) Basic Operations Firefighter; and I do not have an Office of the Illinois State Fire Marshal (OSFM) Basic Operations Firefighter course completion record, but I intend to become certified as a Basic Operations Firefighter or obtain a Basic Operations Firefighter course completion record within a one-year probation period after hire and I understand that obtaining this certification is a condition of permanent post-probationary employment with the Chatham Community Fire Protection District.

Candidate Printed Name

Candidate Signature

Date

RETURN THIS FORM WITH YOUR COMPLETED APPLICATION