

RIVERSIDE FIRE RESCUE

VOLUNTEER FIREFIGHTER APPLICANT SELF-EVALUATION QUESTIONNAIRE

APPLICANT NAME: _____ DATE: _____

AS AN APPLICANT FOR THE POSITION OF VOLUNTEER FIREFIGHTER, IT IS CRITICAL THAT YOU BE FULLY AWARE OF THE ASPECTS OF THIS POSITION. THIS SELF-EVALUATION FORM IS DESIGNED TO HELP YOU DETERMINE WHETHER OR NOT YOU WOULD BE WILLING TO DEVOTE YOUR TIME TO SERVE THIS DEPARTMENT AND COMMUNITY.

PLEASE READ THE INSTRUCTIONS CAREFULLY BEFORE COMPLETING EACH PART OF THE EVALUATION.

THIS IS NOT A TEST. A NEGATIVE RESPONSE TO A QUESTION DOES NOT MEAN AN AUTOMATIC REJECTION OF YOUR APPLICATION. YOUR ANSWER SHOULD REFLECT HOW YOU FEEL.

PART I

THE FOLLOWING IS A LIST OF TASKS AND WORKING CONDITIONS TYPICAL OF THE JOB OF A VOLUNTEER FIREFIGHTER. READ THEM CAREFULLY AND THEN CHECK () THE APPROPRIATE BOX:

YES: THIS MEANS THAT YOU ARE WILLING TO PERFORM THESE DUTIES OR WORK IN THIS ENVIRONMENT.

NO: THIS MEANS THAT YOU ARE NOT WILLING TO PERFORM THESE DUTIES OR WORK IN THIS ENVIRONMENT.

1. YOU MAY HAVE TO RISK PERSONAL SAFETY TO SAVE ANOTHER LIFE OR SOMEONE ELSE'S PROPERTY.
() YES () NO
2. YOU MAY HAVE TO WORK AROUND PERSONS WHO ARE DEAD, DYING, SICK, OR INJURED.
() YES () NO
3. YOU MAY HAVE TO CONSOLE PEOPLE WHO HAVE LOST EVERYTHING AND/OR THOSE WHO HAVE LOST FAMILY MEMBERS OR FRIENDS.
() YES () NO
4. YOU WILL BE WORKING CLOSELY WITH FELLOW VOLUNTEER FIREFIGHTERS. YOU MAY HAVE TO DEAL WITH PERSONALITY CONFLICTS.
() YES () NO
5. YOU WILL BE INTERRUPTED FROM YOUR MEALS, AND OTHER FAMILY ACTIVITIES.

- YES NO
6. YOU WILL BE INTERRUPTED FROM YOUR SLEEP.
 YES NO
7. YOU WILL BE ASKED TO ASSIST IN CLEANING APPARATUS AND EQUIPMENT, AFTER AN EMERGENCY, REGARDLESS OF THE TIME OF DAY.
 YES NO
8. YOU WILL BE EXPECTED TO PERFORM AT A HIGH LEVEL OF COMPETENCY REGARDLESS OF YOUR PHYSICAL, OR EMOTIONAL STATE.
 YES NO
9. YOU WILL BE UNDER THE CRITICAL EYE OF THE PUBLIC AND MAY HAVE TO DEAL WITH UNRULY OR ABUSIVE INDIVIDUALS.
 YES NO
10. YOU WILL WORK UNDER STRESS OF HIGHLY EMOTIONAL AND DANGEROUS SITUATIONS SUCH AS FALLING DEBRIS OR WALLS, EXTREME HEAT, POISONOUS OR EXPLOSIVE GASES, SMOKE, FALLING ELECTRICAL WIRES, AND OTHER HAZARDOUS SITUATIONS.
 YES NO
11. YOU MAY BE EXPOSED TO PERSONS WHO HAVE CONTAGIOUS ILLNESSES OR DISEASES.
 YES NO
12. YOU WILL BE EXPECTED TO OBEY STRICT RULES, REGULATIONS, AND ORDERS.
 YES NO
13. YOU WILL RESPOND TO SITUATIONS WHERE YOU WILL BE ASKED TO PUMP OUT BASEMENTS AND OTHER CHORES NOT RELATED TO FIREFIGHTING OR TREATING THE ILL OR INJURED.
 YES NO
14. AT THE FIRE SCENE, YOU WILL SPEND 5 % OF YOUR TIME FIGHTING FIRES AND 95 % OF YOUR TIME CLEANING UP AFTERWARDS.
 YES NO
15. YOU WILL WORK HARD IN ALL KINDS OF WEATHER AND YOU WILL BE BECOME VERY DIRTY AND SWEATY.
 YES NO
16. YOU WILL HAVE TO DEAL WITH THE PUBLIC WHO DOES NOT ALWAYS UNDERSTAND OR APPRECIATE WHAT YOU DO.
 YES NO
17. YOU WILL BE EXPECTED TO DRILL EVERY TUESDAY NIGHT FROM 6:30 PM TO 9:30 PM PLUS THE OCCASIONAL SATURDAY DRILL.
 YES NO
18. YOU WILL BE EXPECTED TO ATTEND FOUR SHIFTS PER MONTH, FROM 6:00 PM TO 8:00 AM OR 8:00AM TO 6:00PM.
 YES NO

19. YOU WILL BE EXPECTED TO COMPLETE A VOLUNTEER RECRUIT ACADEMY THAT WILL BE APPROXIMATELY 250 HOURS OF INSTRUCTION WITHIN ONE YEAR OF ACCEPTANCE.

() YES () NO

20. YOU WILL BE EXPECTED TO OBTAIN AN EMERGENCY MEDICAL TECHNICIAN CERTIFICATION WITHIN ONE YEAR OF ACCEPTANCE.

() YES () NO

PART II

THE FOLLOWING IS A LIST OF PERSONAL QUALITIES OR CHARACTERISTICS, WHICH ARE ESSENTIAL TO DOING A GOOD JOB AS A VOLUNTEER FIREFIGHTER. READ THEM CAREFULLY AND THEN RATE YOURSELF ON A 1-5 SCALE OF HOW YOU FEEL.

- (1) NOT AT ALL
- (2) SOMEWHAT
- (3) AVERAGE
- (4) ABOVE AVERAGE
- (5) EXCEPTIONAL

THIS IS NOT A TEST. A NEGATIVE RESPONSE TO A QUESTION DOES NOT MEAN AN AUTOMATIC REJECTION OF YOUR APPLICATION. YOUR ANSWER SHOULD REFLECT HOW YOU FEEL.

- 1. PERFORMS WELL UNDER ADVERSE CONDITIONS OF COLD, HEAT, OR STORMY WEATHER ____
- 2. MENTALLY ALERT WHEN AWAKENED FROM SLEEP ____
- 3. FEAR OF HEIGHTS OR ENCLOSED PLACES ____
- 4. RESPECT FOR AUTHORITY AND DISCIPLINE ____
- 5. LIKES CHALLENGES AND LEARNING NEW THINGS ____
- 6. DEPENDABLE ____
- 7. CONCERN FOR PEOPLE, INCLUDING PEOPLE YOU DON'T KNOW ____
- 8. COMMON SENSE ____
- 9. STRONG INTEGRITY AND HONESTY ____
- 10. WORKS AS A TEAM MEMBER ____
- 11. "COOL-HEADED" IN A TOUGH OR EMERGENCY SITUATION ____
- 12. PHYSICALLY ACTIVE ____

PART III – DRUGS

1. HAVE YOU USED MARIJUANA OR ITS DERIVATIVE WITHIN ONE YEAR PRIOR TO MAKING APPLICATION FOR THE POSITION OF FIREFIGHTER?
() YES () NO
2. HAVE YOU USED A CONTROLLED SUBSTANCE (NOT PRESCRIBED FOR YOU BY AN AUTHORIZED INDIVIDUAL) WITHIN THE LAST THREE YEARS?
() YES () NO
3. HAVE YOU USED MARIJUANA OR ITS DERIVATIVE MORE THAN (25) TIMES?
() YES () NO
4. HAVE YOU USED ANY OPIATE (I.E. HEROIN, MORPHINE, OPIUM, ETC) NOT PRESCRIBED FOR YOU BY A PHYSICIAN? (DO NOT INCLUDE THE OCCASIONAL COUGH SYRUP OR MINOR PAIN MEDICINE, WHICH CONTAINS CODEINE, SUCH AS ASPIRIN WITH CODEINE.)
() YES () NO
5. HAVE YOU EVER USED HALLUCINOGENIC DRUGS SUCH AS LSD, PCP, AND MUSHROOMS?
() YES () NO
6. HAVE YOU USED COCAINE MORE THAN THREE (3) TIMES?
() YES () NO
7. HAVE YOU USED A CONTROLLED SUBSTANCE (NOT PRESCRIBED FOR YOU BY AN AUTHORIZED INDIVIDUAL) MORE THAN (10) TIMES? (THIS INCLUDES THE TOTAL USAGE OF ALL OTHER CONTROLLED SUBSTANCES SUCH AS SPEED, AMPHETAMINES, BARBITURATES, AND TRANQUILIZERS.)
() YES () NO
8. EXCLUDING MARIJUANA, HAVE YOU EVER USED MORE THAN (3) DIFFERENT CONTROLLED SUBSTANCES (NOT PRESCRIBED FOR YOU BY AN AUTHORIZED INDIVIDUAL)?
() YES () NO

THIS INFORMATION IS CONFIDENTIAL AND WILL ONLY BE VIEWED BY ADMINISTRATION IN DETERMINING THE ELIGIBILITY OF THE APPLICANTS.

NAME: _____ DATE: _____

SIGNATURE: _____

CONFIDENTIAL DISCLOSURE REPORT

RCW 43.43.834 (2) REQUIRES THAT THE FIRE PROTECTION DISTRICT, AT THE TIME IT ACCEPTS AN APPLICATION FOR THE POSITION OF VOLUNTEER FIREFIGHTER OR PAID FIREFIGHTER, OBTAIN THE FOLLOWING INFORMATION FROM THE APPLICANT, WHEN HIRES, MAY HAVE UNSUPERVISED ACCESS TO CHILDREN UNDER (16) YEARS OF AGE OR DEVELOPMENTALLY DISABLED PERSONS OR VULNERABLE ADULTS DURING THE COURSE OF EMPLOYMENT OR WHERE A VOLUNTEER MAY HAVE ACCESS TO GROUPS OF FIVE (5) OR FEWER CHILDREN UNDER TWELVE (12) AND SIXTEEN (16) YEARS OF AGE, OR DEVELOPMENTALLY DISABLED PERSONS OR VULNERABLE ADULTS. TO COMPLY WITH THE STATUTORY REQUIREMENTS, PLEASE PROVIDE THE FOLLOWING INFORMATION UNDER OATH:

1. HAVE YOU BEEN CONVICTED OF ANY CRIME AGAINST CHILDREN OR OTHER PERSONS?
 YES NO
2. HAVE YOU BEEN CONVICTED OF CRIMES RELATING TO FINANCIAL EXPLOITATION OF A VULNERABLE ADULT?
 YES NO
3. HAVE YOU BEEN FOUND IN DEPENDENCY ACTION UNDER RCW 13.34.040 TO HAVE SEXUALLY ASSAULTED OR EXPLOITED ANY MINOR OR TO HAVE PHYSICALLY ABUSED A MINOR?
 YES NO
4. HAVE YOU BEEN FOUND BY A COURT, IN A DOMESTIC RELATIONS PROCEEDING UNDER TITLE 26 RCW TO HAVE SEXUALLY ABUSED OR EXPLOITED ANY MINOR OR TO HAVE PHYSICALLY ABUSED A MINOR?
 YES NO
5. HAVE YOU BEEN FOUND IN ANY DISCIPLINARY BOARD FINAL DECISION TO HAVE SEXUALLY OR PHYSICALLY ABUSED OR EXPLOITED ANY MINOR OR DEVELOPMENTALLY DISABLED PERSON OR TO HAVE ABUSED OR FINANCIALLY EXPLOITED ANY VULNERABLE ADULT?
 YES NO
6. HAVE YOU BEEN FOUND BY A COURT IN A PROTECTION PROCEEDING UNDER CHAPTER 73.43 RCW TO HAVE ABUSED OR FINANCIALLY EXPLOITED A VULNERABLE ADULT?
 YES NO

I UNDERSTAND THAT THE ABOVE ANSWERS ARE CORRECT AND TRUE STATEMENTS BY ME. IF ANY OF THE ANSWERS ABOVE ARE FOUND TO BE UNTRUTHFUL THIS WILL DISQUALIFY ME FROM THE POSITION OF FIREFIGHTER WITH RIVERSIDE FIRE & RESCUE.

NAME: _____ DATE: _____

SIGNATURE: _____