



**CITY OF TROY FIRE DEPARTMENT  
APPLICATION FOR FIRE FIGHTER**

500 W. Big Beaver Rd.  
Troy MI 48084-5285  
248-524-3419

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DATE \_\_\_\_\_ DRIVER LICENSE NO. \_\_\_\_\_ SOCIAL SECURITY NO. \_\_\_\_\_  
NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_  
(Last) (First) (Middle)  
PRESENT ADDRESS \_\_\_\_\_ LENGTH OF TIME \_\_\_\_\_  
(Number and Street) (City, State and Zip)  
PHONE NO.: \_\_\_\_\_  
(Home) (Work) (Cell)

**If less than 2 years at above address, please complete the following:**

PRIOR ADDRESS \_\_\_\_\_ LENGTH OF TIME \_\_\_\_\_  
(Number and Street) (City, State and Zip)

**AVAILABILITY:**

I am available to respond to alarms during the (check one)

day \_\_\_\_\_ evening \_\_\_\_\_; during the hours of \_\_\_\_\_

**EDUCATION:** (List name of school and last grade completed.)

Grade School \_\_\_\_\_

High School \_\_\_\_\_

Other \_\_\_\_\_

**MILITARY EXPERIENCE:**

Are you an Armed Forces Veteran? Yes [ ] No [ ]

Branch of Service \_\_\_\_\_ Rank \_\_\_\_\_

Type of Discharge \_\_\_\_\_

**REFERENCES:** List four mature responsible persons who are well acquainted with you other than relatives.

<u>Name</u>	<u>Current Address</u>	<u>Phone Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are you currently under indictment for a felony warrant? Yes [ ] No [ ]

Have you ever been convicted of a felony? Yes [ ] No [ ]

If yes, give: Charge \_\_\_\_\_ Court \_\_\_\_\_ Date \_\_\_\_\_

Have you ever been arrested, detained, or taken into custody in this state, in any other state, in military service, or elsewhere, or were you ever investigated by a law enforcement or governmental agency? Yes [ ] No [ ]

If yes, how many times? \_\_\_\_\_ If yes, give details on a separate sheet.

Number of traffic tickets (excluding parking tickets) you have received in the last five (5) years: \_\_\_\_\_

Has your driver's license ever been suspended or revoked? Yes [ ] No [ ]

Have you ever been involved in an accident? Yes [ ] No [ ] If yes, how many? \_\_\_\_\_

Were you judged at fault in any accident? Yes [ ] No [ ]

**EMPLOYMENT HISTORY**

CURRENT EMPLOYER:

Name \_\_\_\_\_ Length of Employment \_\_\_\_\_

Address \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

Type of Work \_\_\_\_\_

Work Hours \_\_\_\_\_ Shift \_\_\_\_\_ Days \_\_\_\_\_

PREVIOUS EMPLOYER:

Name \_\_\_\_\_ Length of Employment \_\_\_\_\_

Address \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

PREVIOUS EMPLOYER:

Name \_\_\_\_\_ Length of Employment \_\_\_\_\_

Address \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

Were you ever subject to DISCIPLINARY ACTION in connection with any employment?

Yes \_\_\_ No \_\_\_ If yes, give details:

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

**ABILITY TO PERFORM JOB FUNCTIONS:**

Are you able to perform the following tasks with or without accommodation?

Climbing \_\_\_\_\_ Wearing of Breathing Apparatus \_\_\_\_\_

**TRAINING AND SKILLS:**

List any training or skill which you feel would be an asset to the Department:

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**AUTHORITY TO RELEASE PERSONAL INFORMATION**

I authorize investigation of all statements contained in this application. I further authorize all past employers and schools to release information to the City of Troy, including but not limited to, attendance records, rating forms, written or verbal evaluations, and academic transcripts. I understand that misrepresentation or omission of facts called for on this application is cause for rejection.

I further understand that to benefit from the protections of the Michigan Handicappers' Civil Rights Act, MCL 37.11011, etc. Seq., I must notify the City in writing of the need for a handicap accommodation within 182 days of the date I knew or should have known that an accommodation was needed.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**AUTHORITY TO INVESTIGATE PERSONAL INFORMATION**

I hereby authorize the City of Troy, Michigan, to conduct investigation into my background including criminal history, driving record, previous employment, educational background, medical history, and to conduct any other investigation that it deems appropriate.

I request any custodian of the aforementioned information including duly constituted law enforcement agencies or judicial officer or other appropriate persons to furnish the City of Troy with all information it may have pertaining to me. I hereby release the City of Troy, Michigan, such custodians and any law enforcement agency, judicial officer or any other individual from any liability arising from the disclosure of any information pertaining to be which is obtained during said investigation.

FULL NAME (please print): \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(Number and Street) (City, State and Zip Code)

DATE OF BIRTH: \_\_\_\_\_

DRIVER LICENSE NO.: \_\_\_\_\_

SOCIAL SECURITY NO.: \_\_\_\_\_

I hereby give permission to for the release of any and all information as may be deemed necessary by the City of Troy.

\_\_\_\_\_  
(Type or print full name) (Date)

\_\_\_\_\_  
(Signature) (Date)

\_\_\_\_\_  
(Witness Signature) (Date)

I, the undersigned, authorize the Department of State Police, Central Records Division, to conduct a criminal history file check by name and identifiers to determine the existence of any arrest resulting in conviction and furnish a response to the TROY FIRE DEPARTMENT.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver License Number: \_\_\_\_\_



## Fire Department

500 West Big Beaver Road

Troy, Michigan 48084

Phone: 248-524-3419

Fax: 248-689-7520

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### What is expected once you're a member of the Troy Fire Department?

- You must attend the fire fighter training academy. The academy is a series of classes intended to provide the necessary basic skills to becoming a certified fire fighter in the State of Michigan. Classes begin in the Fall of each year and end in the Spring of the following year. The academy is hosted by both the Troy Fire Department and Oakland Community College's Oakland Fire Training Institute. Classes are held at the TFD Training Center located on John R Road south of Long Lake Road. After completing the academy, you must pass both a written exam and a practical exam, demonstrating your comprehension of the materials presented. Upon passing, you will be certified as a fire fighter through the Michigan Fire Fighters Training Council.
- You will also be assigned to a fire station and be required to learn the operation of all the apparatus (trucks) and equipment within the station. North end stations train on Monday evenings and south end stations train on Tuesday evenings. While attending the fire fighter training academy, you are not required to attend the regularly scheduled station training, but are encouraged to attend whenever possible in order to get to know your fellow fire fighters and become accustomed to the station practices.
- In addition, you must respond to runs (incidents) your station is dispatched to. The minimum required attendance is 50% of the runs you're normally available for. The department makes use of a computerized sign-out system for those times when you are unavailable, i.e., work and vacations.
- Once assigned to a fire station, you must serve a probationary period. This is typically 12-18 months. During this time is when you will learn your station's apparatus and equipment operation. In order to pass your probationary period, you must demonstrate your knowledge of, and your ability to operate all of the apparatus and equipment.

### Is there anything else to be aware of?

- The TFD provides all necessary equipment including protective turnout gear (helmet, coat, pants, boots, and gloves) along with a light and siren for your vehicle once you've completed your probationary period. (If you desire to use a light and siren.)

- While there is no direct compensation for being a volunteer fire fighter with the TFD, after probation, you become eligible to participate in the department's incentive program where you will start to earn credit toward a deferred compensation plan. After 10 years of service, you become vested in the program. After a combination of 10 years of service and the age of 55, or after a combination of 25 years of service and the age of 50, or after 30 years of service regardless of age, you may start to collect from the incentive program. (This plan is negotiated with the City on a regular basis.)
- In lieu of direct compensation, and in addition to the incentive plan, each fire station as a whole receives a stipend to cover incidental costs such as monthly dinner meetings and social outings for the membership. Such events help to promote comradery among the members.

### Driving Record Criteria

- You will be disqualified if you have any of the following issues related to your driving:
  - Five (5) or more points on your driving record
  - Any current suspensions
  - Two (2) or more prior suspensions on record
  - Driving convictions related to alcohol or narcotic substances
  - Occurrences of careless or reckless driving
  - Multiple (2 or more) failures to appear in court
  - Any outstanding warrants for your arrest
  - Cited for Unsatisfactory Driving Record (UDR) unless record has been clear for the past three (3) years
- Individual driving records may be evaluated on a case-by-case basis in situations where the driving record has been clear for the past three (3) years yet poor in early driving history.

### Criminal History Record

- Applicants with a criminal history record will be evaluated on a case-by-case basis.