



Poulsbo Fire Department
Firefighter/EMT-B & Paramedic
Lateral Application Instructions
Salary \$7,658.95-\$10,722.54/Month

Thank you for your interest in Poulsbo Fire Department!

Please be sure to carefully review all application instructions and testing information.

Application Instructions:

1. Carefully review the minimum requirements on page three. **All requirements must be met** by the specified deadline. Documents submitted after the application deadline will not be accepted unless otherwise stated in this document. The application packet must be received by **Friday, January 31, 2025 at 12:00 pm**.
2. **Complete** the attached application. If there is a section that does not apply to you please mark **N/A**.
3. Applicants must mail/ship/email or hand-deliver required documents.
 - MAIL/HAND-DELIVERY – Gather all required documents and mail/ship the application packet via a traceable carrier (FedEx, UPS, etc.), or hand-deliver to:

**Poulsbo Fire Department
ATTN: Human Resources
911 NE Liberty Rd.
Poulsbo, WA 98370**

- EMAIL– Gather all required documents, and email to **employment@poulsbofire.org**
Please enter last name and position title you are applying for in the subject line.



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Thank you for your interest in Poulsbo Fire Department!

The Poulsbo Fire Department is seeking candidates who desire to be leaders that directly influence the health and safety of the citizens of Poulsbo, Kitsap County, and the greater Olympic Peninsula. If you want your job to be an adventure built on teamwork, trust, and mutual respect, please submit an application packet today!

The Poulsbo Fire Department is a combination fire department that serves the 28,000 citizens of Kitsap County Fire District #18. The fire district covers 55 square miles of the Kitsap Peninsula which includes the City of Poulsbo as well as the communities of Keyport and Port Gamble. The Kitsap Peninsula, on the west side of Puget Sound, is ideally located near Seattle, Tacoma, and Bremerton with easy access to the wilderness of the Olympic Peninsula. The district is nearly surrounded by water, including Hood Canal, Gamble Bay, and Liberty Bay. The City of Poulsbo, located on Liberty Bay, is a diverse and rapidly growing community that continues to celebrate a rich Scandinavian heritage, with Poulsbo being known as "Viking City" and "Little Norway."

Poulsbo Fire provides 'all hazard' response to fires, technical rescue, service, and emergency medical incidents which includes the care and transport of both ALS and BLS patients. The District responds to an average of 13 emergency calls per day out of three fire stations. The line personnel are supported by 11 administrative and support personnel, as well as a volunteer battalion. In addition to emergency responses and training, our personnel are regularly engaged in the community performing fire prevention, public education, and community service related activities. The Poulsbo Fire Department operates under the leadership of Chief James Gillard and is governed by a five-member Board of Fire Commissioners.

KEEP READING FOR POSITION QUALIFICATIONS



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Application Deadline:
Friday, January 31, 2025 at 12:00 pm

Lateral Firefighter/EMT/Paramedic Minimum Requirements:

- Successful completion of recognized full-time, career structural fire academy (IFSAC/Pro Board FFI) or equivalent, at the discretion of the Fire Chief.
- Must be currently employed or laid off within the last eighteen (18) months after serving, with a public sector fire agency for a minimum of 12 consecutive months as a full-time structural firefighter, IAFF represented non-public fire sector firefighters may be eligible for lateral hire at the district's discretion.
- Have a current National Registry or Washington state EMT or paramedic certificate or equivalent or eligible for reciprocity.
- As a minimum, lateral personnel shall be hired one step below the level they would qualify for based on previous experience as a career firefighter.
- Must be 18 years of age or older at time of application
- Be a U.S. citizen or eligible for employment in the United States
- Possess a valid Washington state driver license or the ability to drive and obtain a Washington state license within 90 days of hire
- High school graduate or equivalent (GED)
- Be able to communicate in English, both orally and in writing



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Salary:

- ❖ Firefighter/EMT-B starting monthly salary range (based on qualification and experience):
\$7,658.95-\$9,573.69/month
- ❖ Firefighter/Paramedic starting monthly salary range (based on qualification and experience):
\$8,807.80-\$10,722.54/month

Benefits:

- ❖ Paid Vacation
- ❖ Kelly Days
- ❖ Personal Days
- ❖ Retirement LEOFF II
- ❖ 2% deferred comp match
- ❖ Education Incentive
- ❖ Longevity Increases
- ❖ Paid Sick Leave
- ❖ 100% Paid Healthcare (Medical, Dental, Vision)
- ❖ Life Insurance
- ❖ HRA - Department makes bi-annual contributions, depending on the health insurance plan selected

Equal Employment Opportunity

Poulsbo Fire Department is an equal opportunity employer. Qualified applicants receive consideration for employment without discrimination because of race, color, religion, creed, gender, sexual orientation, national origin, ancestry, age, disability, marital status, honorably discharged veteran or military status, genetic information, or any other legally protected classification.

The Poulsbo Fire Department does not discriminate on the basis of disability in programs and activities, which it operates pursuant to the requirements of the Americans with Disabilities Act of 1990, and ADA Amendments Act. This policy extends to both employment and admission to participation in the programs, services and activities of the Poulsbo Fire Department. Reasonable accommodation for employees or applicants for employment can be provided.



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Friday, January 31, 2025 at 12:00 pm

- Completed Application - Ensure you attach required documentation as stated in the application:
*Application *Resume *Two Letters of Recommendation *Letter of Interest (Cover Letter)
*Certifications**
- Please attach the following certifications with your application: IFSAC/Pro Board FFI, EMT,
Paramedic**

Please submit all required documents to the address below

**Poulsbo Fire Department
ATTN: Human Resources Dept.
911 NE Liberty Rd.
Poulsbo, WA 98370
or email to
employment@poulsbofire.org**

Please be sure to carefully review checklist and application instructions before submission. Incorrect, missing, or otherwise incomplete applications will be cause for disqualification. Poulsbo Fire Department is not responsible for late, misdirected or incomplete applications. Contact the human resources department before the application deadline with any questions regarding the application, required documents, or testing.



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WHAT TO EXPECT NEXT?

All applicants who submit a complete application packet will receive an invitation to participate in a one-way Sparkhire interview. Invitations will be sent out on **January 31, 2025**, and the **deadline for submission is February 4, 2025**.

The top candidates from the interview review process will be invited for an in-person panel interview, tentatively scheduled for the week of **February 11th, 2025**.

The most qualified candidates from the previous stages will be invited to interview with the Fire Chief, tentatively scheduled for **February 13, 2025**.

If you receive a conditional offer of employment, you will need to pass additional assessments:

Background Check: Credit, Driving, Employment History, Criminal Record

Medical Evaluation: Drug, Hearing, Psychological and Physical Screenings

Please contact Nichole Sawyers at (360) 779-3997 or employment@poulsbofire.org with questions regarding the application and/or required documents before the application deadline date. **Please ensure your email is checked regularly (to include your spam folder) as this will be the primary means of communication.**





POULSBO FIRE DEPARTMENT/ KITSAP COUNTY FIRE DISTRICT #18 APPLICATION FOR EMPLOYMENT

Please read the application entirely before completing

Please select the position for which you are applying:

Lateral Firefighter/EMT

Lateral Firefighter/Paramedic

| 1. FULL NAME | | | 2. EMAIL ADDRESS | |
|--|------------|-------------------------------|------------------|--|
| Last Name | First Name | Middle Name | | |
| 3. TELEPHONE NUMBERS | | HOME/CELL (include area code) | | |
| | | Day | Night | |
| 4. VETERANS SCORING CRITERIA | | | | |
| Have you served in the United States Military Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | |

List all of your military service below, including service in the reserve, National Guard, and U.S. Merchant Marine.

| Branch | Month/Year To: Month/Year | Rank at Discharge | DD 214 Issued | |
|--------|---------------------------|-------------------|------------------------------|-----------------------------|
| | To | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | To | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | To | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Have you ever received less than a General Discharge from any branch of Military? Yes No

Do you wish to use veteran's preference points as part of this testing process? Yes No

**YOU MUST ATTACH A COPY OR YOUR DD214 LONG FORM
TO RECEIVE PREFERENCE POINTS**

| 5. EDUCATION | | | | |
|--|----------------------------|-------|-------------------|--|
| List the schools you have attended, beyond high school, beginning with the most recent (#1). List only College, University, or Vocational / Technical / Trade Schools in which you are currently a student, past student, or have completed. Current student is defined as currently enrolled or less than three months since completion of last semester / quarter. Education without completion is grouped into #3. If applicable, your fire academy must be documented in #4. | | | | |
| Did you successfully graduate from High School or earn your GED? Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | |
| Name of High School or location of GED: | | | | State |
| #1 | Name of School | State | Area of study: | |
| Current Student: <input type="checkbox"/> Certificate: <input type="checkbox"/> Associates: <input type="checkbox"/> Bachelors: <input type="checkbox"/> Masters: <input type="checkbox"/> | | | | Year completed: |
| #2 | Name of School | State | Area of study: | |
| Current Student: <input type="checkbox"/> Certificate: <input type="checkbox"/> Associates: <input type="checkbox"/> Bachelors: <input type="checkbox"/> | | | | Year completed: |
| #3 | Name of School | State | Area of study: | |
| Current Student: <input type="checkbox"/> Certificate: <input type="checkbox"/> Associates: <input type="checkbox"/> Some College: <input type="checkbox"/> | | | | Year completed or number of credits completed: |
| #4 | Name of Fire Academy | State | Volunteer Academy | Career/Fulltime Academy |
| Year completed: | Describe academy schedule: | | | |

6. EMPLOYMENT

List your employment history, beginning with the present (#1). You should list all full-time work, part-time work, per diem, military service, self-employment, other paid work, and all periods of unemployment. Do not list employment before your 16th birthday. Do not list volunteer or resident experience in Section #6 (see Section #7 - Volunteer). Part-time requires compensation for all hours worked.

| #1 | Month | Year | To | Month | Year | Employer | Your Position Title | | |
|---|-------|------|----|-------|------|------------------|---------------------|----------|------------------|
| | | | | | | | | | |
| Employer's Street Address | | | | | | City | State | Zip Code | Telephone Number |
| Street Address of Job Location (if different than Employer's Address) | | | | | | City (Country) | State | Zip Code | |
| Supervisor's Name | | | | | | Telephone Number | | | |

| #2 | Month | Year | To | Month | Year | Employer | Your Position Title | | |
|---|-------|------|----|-------|------|------------------|---------------------|----------|------------------|
| | | | | | | | | | |
| Employer's Street Address | | | | | | City | State | Zip Code | Telephone Number |
| Street Address of Job Location (if different than Employer's Address) | | | | | | City (Country) | State | Zip Code | |
| Supervisor's Name | | | | | | Telephone Number | | | |

| #3 | Month | Year | To | Month | Year | Employer | Your Position Title | | |
|---|-------|------|----|-------|------|------------------|---------------------|----------|------------------|
| | | | | | | | | | |
| Employer's Street Address | | | | | | City | State | Zip Code | Telephone Number |
| Street Address of Job Location (if different than Employer's Address) | | | | | | City (Country) | State | Zip Code | |
| Supervisor's Name | | | | | | Telephone Number | | | |

| #4 | Month | Year | To | Month | Year | Employer | Your Position Title | | |
|---|-------|------|----|-------|------|------------------|---------------------|----------|------------------|
| | | | | | | | | | |
| Employer's Street Address | | | | | | City | State | Zip Code | Telephone Number |
| Street Address of Job Location (if different than Employer's Address) | | | | | | City (Country) | State | Zip Code | |
| Supervisor's Name | | | | | | Telephone Number | | | |

| #5 | Month | Year | To | Month | Year | Employer | Your Position Title | | |
|---|-------|------|----|-------|------|------------------|---------------------|----------|------------------|
| | | | | | | | | | |
| Employer's Street Address | | | | | | City | State | Zip Code | Telephone Number |
| Street Address of Job Location (if different than Employer's Address) | | | | | | City (Country) | State | Zip Code | |
| Supervisor's Name | | | | | | Telephone Number | | | |

7. VOLUNTEER

List your volunteer history, beginning with the present (#1). For example, list resident firefighter experience for which you were not compensated for every hour worked. Do not list full-time, part-time, per diem, or military experience in Section #7.

| #1 | Month | Year | To | Month | Year | Agency / Foundation | Your Position Title | | |
|---|-------|------|----|-------|------|---------------------|---------------------|----------|------------------|
| | | | | | | | | | |
| Agency / Foundation's Street Address | | | | | | City | State | Zip Code | Telephone Number |
| Street Address of Volunteer Location (if different than previous address) | | | | | | City (Country) | State | Zip Code | |
| Supervisor's Name | | | | | | Telephone Number | | | |

| #2 | Month | Year | To | Month | Year | Agency / Foundation | Your Position Title | | |
|---|-------|------|----|-------|------|---------------------|---------------------|----------|------------------|
| | | | | | | | | | |
| Agency / Foundation's Street Address | | | | | | City | State | Zip Code | Telephone Number |
| Street Address of Volunteer Location (if different than previous address) | | | | | | City (Country) | State | Zip Code | |
| Supervisor's Name | | | | | | Telephone Number | | | |

| #3 | Month | Year | To | Month | Year | Agency / Foundation | Your Position Title | | |
|---|-------|------|----|-------|------|---------------------|---------------------|----------|------------------|
| | | | | | | | | | |
| Agency / Foundation's Street Address | | | | | | City | State | Zip Code | Telephone Number |
| Street Address of Volunteer Location (if different than previous address) | | | | | | City (Country) | State | Zip Code | |
| Supervisor's Name | | | | | | Telephone Number | | | |

| #4 | Month | Year | To | Month | Year | Agency / Foundation | Your Position Title | | |
|---|-------|------|----|-------|------|---------------------|---------------------|----------|------------------|
| | | | | | | | | | |
| Agency / Foundation's Street Address | | | | | | City | State | Zip Code | Telephone Number |
| Street Address of Volunteer Location (if different than previous address) | | | | | | City (Country) | State | Zip Code | |
| Supervisor's Name | | | | | | Telephone Number | | | |

8. LETTERS OF RECOMMENDATION

List two people who know you well and attach their letter of recommendation. They should be good friends, peers, colleagues, college roommates, etc. Do not list your spouse, former spouses, or other relatives.

| #1 | Name | Dates Known | Month/Year | Month Year | Telephone Number | Day | Night |
|------------------------------|------|-------------|------------|------------|------------------|------------------------------|--------------------------------|
| | | | To | | | | |
| Current Home or Work Address | | | | | City (Country) | State | Zip Code |
| #2 | Name | Dates Known | Month/Year | Month Year | Telephone Number | Day <input type="checkbox"/> | Night <input type="checkbox"/> |
| | | | To | | | | |
| Current Home or Work Address | | | | | City (Country) | State | Zip Code |

9.A. CERTIFICATIONS

List any certifications relevant to the position for which you are applying. All claims of IFSAC, EMT, and EMT-P certifications require a certification number and should be attached to your application.

| Certification # | Title | Credentialing Agency | Initial Certification Date | Last Renewal Date |
|-----------------|-------|----------------------|----------------------------|-------------------|
| | | | | |
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9.B. CERTIFICATION WORK EXPERIENCE

Choose the certification level for which you are applying. Only choose one certification. Provide the total number of months you have actively served under your certification (#1). Provide the break down of months for every applicable category and total the months (#2). #1 and #2 must equal each other. Please provide the average the number of calls per year to which you respond.

| | | | |
|---|---------------------------------------|-----------|--|
| EMT | State you are currently certified in: | #1 | Total number of months actively serving under EMT certification: |
| Category | | | Months |
| EMT - (911) Non-Transporting | | | |
| EMT - BLS Transporting Unit | | | |
| EMT - ALS Transporting Unit | | | |
| EMT - Other: Describe: | | | |
| #2 | | | Total of Months: |
| Number of calls per year you respond to: | | | |

| | | | |
|---|---------------------------------------|-----------|--|
| EMT-P | State you are currently certified in: | #1 | Total number of months actively serving under EMT-P certification: |
| Category | | | Months |
| EMT-P - (911) Non-Transporting | | | |
| EMT-P - ALS Transporting Unit | | | |
| EMT-P - Other: Describe: | | | |
| #2 | | | Total of Months: |
| Number of calls per year you respond to: | | | |

10. BACKGROUND

Applicants must be 18 years of age at the time of application. Are you at least 18 years of age? Yes No

Do you have a valid driver license? Yes No Which state? Driver license number:

Do you have a special endorsement? Describe:

Have you ever been ticketed, convicted, pleaded no contest, deferred, or paid a fine for any traffic violation(s) in the past seven (7) years? Yes No (Do not rely on public records searches to determine which to include - include all)

If yes, please explain:

Have you been convicted or pled guilty of a felony or a misdemeanor other than minor traffic offenses, or been released from prison? Yes No

If answer is "yes," please give the nature of the offense, date(s) of conviction, and the court in which you were convicted of the offense (conviction of a crime may or may not disqualify you).

Instructions: 1) Please include a copy of your DD214 if applicable. 2) Provide IFSAC, EMT, and EMT-P certifications, as applicable. 3) Provide a copy of your resume, letter of interest (cover letter), and two letters of recommendation. ____ (initial here)

I understand that if hired, and I lose, damage, or fail to return any Poulsbo Fire Department property at the time of my separation of employment, Poulsbo Fire Department is authorized to deduct from my final paycheck the cost of such property. ____ (initial here)

I certify I am not engaged in any outside activity or business that could be considered in conflict with Poulsbo Fire Department's interest, nor will I become engaged in such activity or business if employed. ____ (initial here)

Poulsbo Fire Department reserves the right to alter/change the testing process. I understand that interviews are given on a competitive basis, using job-related factors, after a written application packet has been received and reviewed. Because of the large number of applications received, not everyone who applies for a vacant position will be interviewed and/or tested. Additionally, I give permission for Poulsbo Fire Department to contact references, and request information related to educational background, employment history, and special licenses or training. ____ (initial here)

I understand that, if selected, I will be required to provide proof of my identity and my legal right to work in the United States prior to actual employment with Poulsbo Fire Department. ____ (initial here)

Poulsbo Fire Department is an equal opportunity employer. Qualified applicants receive consideration for employment without discrimination because of race, color, religion, creed, gender, sexual orientation, national origin, ancestry, age, disability, marital status, honorably discharged veteran or military status, genetic information, or any other legally protected classification.

CERTIFICATION THAT MY ANSWERS ARE TRUE

I hereby certify, under penalty of perjury in the State of Washington, that this application contains no willful misrepresentation and the information given is true and complete to the best of my knowledge and belief. I understand that knowingly providing false information on this application will be grounds for elimination from further consideration; or, if employed, for dismissal at any time.

| | | | | | |
|---|--|--|-------|---------------|-------------------|
| Signature | | Last 4 Digits of your Social Security: | | Today's Date: | |
| Mailing Address: | | City | State | Zip Code | Cell Number |
| Physical Address: (if different than above) | | City | State | Zip Code | Home Phone Number |