



**Whatcom County Fire  
District 11**

**Lummi Island Fire Department**

**Volunteer  
Firefighter/EMT  
Application  
Packet**

## Volunteer on-boarding Process

1. Start attending training (Covid vaccinations requirements in effect)
2. Complete volunteer application: to be reviewed by Chief
3. Meeting with Chief, and a designee of the Chief

Observe Only

### CONDITIONAL OFFER

4. Pre acceptance Physical
  - Authorization forms
  - Fit for duty physical
  - Audiometric medical history
5. Background check completed

6. BOVFF disability enrollment
7. Turnout gear issued to participate in training
8. Board of Commissioners acknowledgement

Participate in Training

### ACCEPTED

9. Company assignment-meet with Chief and Company Officer

#### 10. Pre-response probation

- |                                 |                              |
|---------------------------------|------------------------------|
| ○ NIMS ICS training             | ○ Equipment locations        |
| ○ Infectious disease            | ○ Gurney operation           |
| ○ Fit test and SCBA training    | ○ Response guidelines        |
| ○ FF safety                     | ○ Pager operation            |
| ○ CPR first aid                 | ○ Door code                  |
| ○ Radio training                | ○ IaR, RescueHub, ImageTrend |
| ○ LZ training                   | ○ Department e-mail          |
| ○ EVIP training and drive tests | ○ Department policies        |

11. Pager, plates issued for responding



## WHATCOM COUNTY FIRE DISTRICT NO. 11

### Lummi Island Volunteer Fire Department

3809 Legoe Bay Road \* P.O. Box 130 \* Lummi Island, WA 98262  
Phone: (360) 758-2411 Fax: (360) 758-2041 www.lummiislandfire.com



Our Mission is “to save and protect the lives and property of Lummi Island from fires, illness, injury, natural or man-made disasters, and hazardous materials incidents by providing fire suppression and emergency medical services as well as to prevent and educate through prevention and education programs”. The success of our mission hinges upon the Volunteers who serve this community.

Becoming and being a member of a volunteer fire department requires a commitment to the community and a strong dedication to acquire and maintain basic training and skills. As a new member, you will be required to complete Initial firefighting and medical training. The District will make every effort to work around your personal and work commitments to schedule these initial training requirements. The District will pay for all approved training during your membership to include the following initial training:

- **12 hr.** Emergency Vehicle Incident Prevention
- **4 hr.** Infectious Disease Training
- **24 hr.** CPR and First Aid for Health Care Providers
- **32 hr.** Hazardous Materials Training
- **200 hr.** Firefighter Training
- **225 hr.** Emergency Medical Technician Certification Training

Ongoing weekly training is paramount to maintain your skills. Accordingly, WCFD 11 requires a long-term commitment to weekly training attendance.

Read this application thoroughly before completing. Fill out this application entirely. There are several parts that require initials, signatures, and witnesses. Fill out your application truthfully and honestly in all respects. If you are accepted and subsequently it is discovered that your application was intentionally filed with errors, or a discrepancy in information provided is discovered, you may be suspended or removed as a volunteer. **When submitting this application, bring your driver's license, and high school diploma or GED so we can make copies for your file.**

You are encouraged to attend and observe training nights during the application process. We will try to involve you when it is appropriate. Background checks are obtained through Pinnacle Investigations. If you cannot clear federal, state, and local checks, it is unlikely acceptance will be granted. In addition, we will obtain a driving record abstract, along with drug testing at the time of your pre-employment physical.

**WCFD 11 has a ZERO tolerance drug policy in place, and we take it very seriously.**

After the application is submitted and reviewed, you will have a meeting with the Chief, so that you understand the commitment you are making and the impact it may have on your personal and work life. Following the meeting, if you are conditionally accepted as a volunteer, you will receive a packet and instructions for a pre-acceptance physical and background check authorization forms. It is your responsibility to schedule these appointments in a timely manner. The cost of the physical, background checks, and any subsequent training during your time as a member of WCFD 11 will be paid for by the district.



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After we receive your physical clearance paperwork and a clear background check, you will be formally accepted. Once accepted, you will go in to start your vaccination series, blood work and chest x-rays if applicable. An orientation class can be scheduled at your earliest convenience, at the end of which you will be issued a pager and be able to start responding to calls.

## Volunteer Firefighter EMT

### Job Description

#### RESPONSIBILITIES INCLUDE BUT ARE NOT LIMITED TO:

1. Operates or rides in an ambulance and/or fire apparatus' to fire alarms and requests for pre-hospital emergency medical care.
2. Administers pre-hospital emergency medical care to sick or injured patients.
3. Extricates victims from vehicle crashes and treats injuries while transporting the patients to the next level of care or transport.
4. Places equipment, lays and connects hose, operates high capacity pumps, and directs water streams; raises, climbs, and lowers ladders; uses chemical extinguishers, and uses self-contained breathing apparatus; enters burning buildings as part of a fire suppression team.
5. Performs ventilation tasks; carries heavy objects and equipment and carries others during rescue, responds to hazardous material, rescue, and other non-fire emergency incidents; provides necessary support activities.
6. Completes reports and documentation as required.
7. Participates in training drills; attends training and departmental classes on fire fighting, hydraulics, first aid and emergency medical procedures, fire equipment, apparatus and other classes associated with recognized firefighter and EMS standards.
8. Operates department equipment and apparatus; performs necessary maintenance, testing and care of fire hoses, trucks, ladders and auxiliary equipment and apparatus.

#### MINIMUM QUALIFICATIONS:

- Copy of current Washington state's driver license, proof of authority to work in the United States and high school diploma or GED
- Ability to learn the necessary knowledge, skills, and abilities to perform the job
- Working knowledge of driver safety

#### REQUIREMENTS:

- Must be at minimum 18 years of age
- Must possess a current Washington State Driver's license
- Must be able to read and write the English language
- Must be able to pass a department medical exam to document ability to perform required job duties.



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#### PHYSICAL DEMANDS:

This job is physically demanding. The Firefighter EMT must have the ability to lift and carry fire equipment, medical equipment, and patients through obstacles in environments that may be unsafe. They must also possess the ability to follow written and verbal orders under duress and make decisions that may affect the safety of themselves, their partners and those they are trying to save. Firefighter EMTs must always exhibit situational awareness.

The Firefighter EMT must be able to lift 50 pounds to chest, be able to move 100 pounds, be capable of crawling while carrying or lifting, and have the ability to steady oneself and maintain balance to keep from falling.

#### WORKING CONDITIONS:

Work is performed in the fire station and the surrounding district area, with required response time to emergencies as they occur. Firefighter EMTs work in dangerous conditions including unstable structures, fire-ridden locations, and accident scenes. Traffic, weather, and hazardous materials also contribute to the unsafe working environment. Additionally, Firefighter EMTs are exposed to physically and mentally stressful situations, including trauma, illness, death, contagious diseases, cramped surroundings, and contaminated environments. Work involves responding to emergency calls in inclement weather, with temperatures sufficiently low or high enough, to cause marked bodily discomfort/reactions. Frequent encounters with vibration/noise exceeding 80 decibels constant or intermittent, may cause notable distraction or possible hearing loss. Limited visibility, exposure to hazardous or toxic chemicals and gases, smoke inhalation, exposure to burns and radiant energy, electrical shock, as well as exposure to bloodborne and airborne pathogens may occur. Falling objects at incident scenes, hazards from equipment, traffic and working in high, confining, or restrictive places may pose additional physical risks.

**The duties listed above are intended only as illustrations** of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related or a logical assignment to the position.

**NOTHING CONTAINED IN THESE JOB DESCRIPTIONS OR ANY OTHER WRITTEN POLICY OF THE DISTRICT IS INTENDED TO BE PART OF ANY EMPLOYMENT RELATIONSHIP OR CONTRACT. VOLUNTEERS SERVE IN AN AT-WILL CAPACITY. THESE JOB DESCRIPTIONS FOR THE DISTRICT OR ANY OTHER WRITTEN POLICY OF THE DISTRICT ARE MERELY STATEMENTS OF DISTRICT POLICY AND DO NOT AMOUNT TO PROMISES OF SPECIFIC TREATMENT. FURTHERMORE, THE DISTRICT RESERVES THE RIGHT TO MODIFY THE AFOREMENTIONED JOB DESCRIPTION AND DISTRICT POLICIES AT ANY TIME.**

Whatcom County Fire District 11 is an Equal Employment Opportunity agency. Decisions regarding selection, promotion and tenure shall be free from restrictions based on physical, cultural religious or other characteristics that are not directly related to the qualifications and ability of an individual to perform the requirements of the position.



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**\*NOTE:** You will be issued your own set of gear and equipment. If at any time you leave the department, you must return all issued equipment in person and be checked out and signed off by the Chief or designee. You will be financially responsible for any equipment not returned.

**I have read the above instructions and understand them. I understand that volunteer positions with Whatcom County Fire District 11 are at will positions, that I have no contractual right to serve as a volunteer and that my position may be terminated at-will with or without cause. I have also read the job description and requirements of a volunteer Firefighter EMT attached with this application and believe that I qualify. I commit to completing all initial required training in as timely a manner as is practicable, and to place a high level of importance on all future training opportunities.**

**Name printed:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_







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List any criminal offenses, traffic citations or infractions of which you have been convicted: \_\_\_\_\_

Can you meet the physical requirements of the job? \_\_\_\_\_

Medical/First Aid Certification? YES \_\_\_\_\_ NO \_\_\_\_\_

Type and Level: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Previous firefighting experience? YES \_\_\_\_\_ NO \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Department Name: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_

List three (3) personal references, not related to you.

	NAME	PHONE NUMBER
1.	_____	_____
2.	_____	_____
3.	_____	_____

**I hereby certify that all statements made in this application form or in any attachments are true and complete to the best of my knowledge, and I understand that any false or misstatements of material facts may subject me to disqualification or dismissal.**

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





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## Authorization to Release Information

I \_\_\_\_\_ authorize you to furnish Whatcom County Fire District # 11 with any and all information that you have concerning me, my work record, my reputation, my medical records, driving records, and my military service records. Information of a confidential or privileged nature may be included. Your reply will be used to assist Whatcom County Fire District # 11 in determining my qualifications and fitness for a position I am seeking with Whatcom County Fire District # 11

I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, and waive these rights with the understanding that information furnished will be used by Whatcom County Fire District # 11 in conjunction with employment procedures.

I hereby release you, your organization and others from any liability or damage, which may result from furnishing the information, requested.

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

NOTE: A photocopy reproduction of this request shall be for all intents and purposes as valid as the original. You may retain this form or a photocopy for your file if you so desire.



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I \_\_\_\_\_, of my own free will and accord, in the presence of these witnesses, do hereby promise and swear that I will attend the minimum requirements for training; answer all Department Alarms or Calls if in my power to do so; I will obey all orders given by the Chief or any other officer; I will follow the Departments Standard Operating Guidelines (S.O.G.'s) That I do my utmost to guard the lives and property of this community, and be ever watchful of the dangers confronting my fellow firefighters. To this I pledge to the best of my ability.

Signed, \_\_\_\_\_ Date \_\_\_\_\_

Witnessed by \_\_\_\_\_ Date \_\_\_\_\_

Witnessed by \_\_\_\_\_ Date \_\_\_\_\_

I understand there can be serious consequences if I do not follow the guidelines or properly execute orders given, including disciplinary action that may result in termination. \_\_\_\_\_ (Initials)

I authorize Whatcom County Fire District # 11 to have a criminal background check done on me and perform any other background checks as deemed necessary. \_\_\_\_\_ (Initials)

I authorize Whatcom County Fire District # 11 to have my driving record researched. \_\_\_\_\_ (Initials)

I understand that I must successfully complete a physical exam prior to acceptance. \_\_\_\_\_ (Initials)

I understand that I must successfully complete a **Firefighter Recruit Academy** or equivalent and **Emergency Medical Technician (EMT) class** after acceptance \_\_\_\_\_ (Initials)

**FOR DEPARTMENTAL USE ONLY**

Accepted for membership Date: \_\_\_\_\_ Personnel No. \_\_\_\_\_

Rejected for membership.

Reason for rejection: \_\_\_\_\_