



# Westport Fire Department

Daniel K. Baldwin  
Chief of Department

Mark A. Brisk  
Deputy Chief

## APPLICATION FOR EMPLOYMENT

### CALL FIREFIGHTER

*The Town of Westport and the Westport Fire Department are equal opportunity employers.*

#### PERSONAL INFORMATION

Date of Application: \_\_\_\_\_

Full Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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

If hired, can you provide proof of citizenship or legal right to work? \_\_\_\_ Yes \_\_\_\_ No

Has the Town of Westport and/or the Westport Fire Department employed you in the past?

\_\_\_\_ Yes \_\_\_\_ No

If yes, state the date and department. \_\_\_\_\_

Do you have a current and valid driver's license? \_\_\_\_ Yes \_\_\_\_ No

Are you a Veteran? \_\_\_\_ Yes \_\_\_\_ No

If you are related to anyone employed by the Town of Westport and/or the Westport Fire Department, please provide their name and department. (The purpose of this question is to avoid a "conflict of interest" M.G.L. c.268A).

\_\_\_\_\_

Date available to start: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

\_\_\_\_\_

54 Hix Bridge Road  
Westport, MA 02790



Phone: 508.636.1110

[www.westportfire.org](http://www.westportfire.org)



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## EDUCATION

Name/Location	Course of Study	Years Completed	Did you graduate?	Degree
High School				
College				
Graduate School				
Technical School				

**CERTIFICATIONS:** Please list any **Fire & EMS** certifications or licenses you have obtained.

Type

Level

Date

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**CERTIFICATIONS:** Please list any additional certifications you may have.

Type

Level

Date

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

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## EMPLOYMENT HISTORY

1. Employer's Name: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Worked from: \_\_\_\_\_ to: \_\_\_\_\_

Immediate Supervisor's Name and Job Title \_\_\_\_\_

May we contact this employer? \_\_\_\_ Yes \_\_\_\_ No

Describe the work you perform: \_\_\_\_\_

Reason(s) for leaving: \_\_\_\_\_

2. Employer's Name: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Worked from: \_\_\_\_\_ to: \_\_\_\_\_

Immediate Supervisor's Name and Job Title \_\_\_\_\_

May we contact this employer? \_\_\_\_ Yes \_\_\_\_ No

Describe the work you perform: \_\_\_\_\_

Reason(s) for leaving: \_\_\_\_\_

3. Employer's Name: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Worked from: \_\_\_\_\_ to: \_\_\_\_\_

Immediate Supervisor's Name and Job Title \_\_\_\_\_

May we contact this employer? \_\_\_\_ Yes \_\_\_\_ No

Describe the work you perform: \_\_\_\_\_

Reason(s) for leaving: \_\_\_\_\_

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## REFERENCES

Please provide professional references. Note that references listed in this section may be contacted.

### Reference - 1

Name/Relationship: \_\_\_\_\_ Firm: \_\_\_\_\_

Telephone: Daytime \_\_\_\_\_ Work \_\_\_\_\_

Email address (if available): \_\_\_\_\_

### Reference - 2

Name/Relationship: \_\_\_\_\_ Firm: \_\_\_\_\_

Telephone: Daytime \_\_\_\_\_ Work \_\_\_\_\_

Email address (if available): \_\_\_\_\_

### Reference - 3

Name/Relationship: \_\_\_\_\_ Firm: \_\_\_\_\_

Telephone: Daytime \_\_\_\_\_ Work \_\_\_\_\_

Email address (if available): \_\_\_\_\_

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## AGREEMENT

The information provided in this employment application is true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

I authorize the investigation of all statements contained in this application and the release of any pertinent information regarding my education, past employment history, and background. I authorize the Town of Westport and/or the Westport Fire Department to obtain any information from schools, employers, or individuals relating to my activities. This information may include, but is not limited to: academics, achievement, performance, attendance, personal history, and discipline. Further, I hereby authorize all references, persons, schools, my current employer (if applicable), and previous employers and organizations named in this application, unless otherwise stated, to provide the Town of Westport and/or the Westport Fire Department with any relevant information that may be required to arrive at an employment decision. I understand that the information released is for the Town of Westport and/or the Westport Fire Department's use only.

I hereby voluntarily release, discharge, and exonerate the Town of Westport and/or the Westport Fire Department, its agents and representatives, and any person so furnishing information from all liabilities of every nature and kind arising out of the furnishing or inspection of such documents, records, and other information or the investigations made by or on behalf of the Town of Westport and/or the Westport Fire Department.

I understand that all appointments are probationary and that I must demonstrate my ability for continued employment. I also understand that I must complete the Massachusetts Call/Volunteer Firefighting Academy and obtain the Firefighter I/II Pro-Board Certification.

If required for the position I am seeking, I agree to take a physical examination, which may include testing for drugs or a psychological examination as required. I understand that I may be required to take the Massachusetts Physical Ability Test. I recognize that any offer of employment is contingent upon the satisfactory results of such an examination(s).

I represent that I have read and fully understand the foregoing and seek employment under these conditions.

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

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

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## Town of Westport and/or the Westport Fire Department Release

I \_\_\_\_\_, a candidate for the position of Call Firefighter, hereby authorize the Town of Westport and/or the Westport Fire Department to investigate all statements in my application and to secure any necessary information from all my employers, references, and academic institutions. I hereby release all of those employers, references, academic institutions, and the Town of Westport and/or the Westport Fire Department from any liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the Town of Westport and/or the Westport Fire Department.

I understand that any offer of employment is contingent upon receipt of a satisfactory report concerning my academic credentials and employment references. I further understand that any false or misleading statements will be sufficient cause for rejection of my application if the Town of Westport and/or the Westport Fire Department has not yet employed me, and for immediate dismissal if the Town of Westport and/or the Westport Fire Department has employed me. I also authorize the Town of Westport and/or the Westport Fire Department to supply information about my employment record, in whole or in part, in confidence to any prospective employer, government agency, or other party having legal and proper interest, and I hereby release the Town of Westport and/or the Westport Fire Department from any liability for its providing this information.

In the event of my employment with the Town of Westport and/or the Westport Fire Department, I will comply with all rules, regulations, and policies outlined in the Town of Westport and/or the Westport Fire Department's Bylaws or other communications distributed by the Town of Westport and/or the Westport Fire Department. I will comply with all rules, regulations, policies, and procedures of the Westport Fire Department.

I understand that nothing in this employment application, in the Town of Westport and/or the Westport Fire Department's policy statements, personnel guidelines, or in my communications with any Town of Westport and/or the Westport Fire Department official is intended to create an employment contract between the Town of Westport and/or the Westport Fire Department and me. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Town of Westport and/or the Westport Fire Department unless it is made in writing and signed by a Town of Westport and/or the Westport Fire Department official.

I hereby acknowledge that I have read and understand the preceding statement.

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

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## Criminal Offender Record Information (CORI) Acknowledgment Form

TO BE USED BY ORGANIZATIONS CONDUCTING CORI CHECKS FOR EMPLOYMENT, VOLUNTEER, SUBCONTRACTOR, LICENSING, AND HOUSING PURPOSES.

The Westport Fire Department is registered under the provisions of M.G.L. c, 6, §172 to receive CORI to screen current and otherwise qualified prospective employees, subcontractors, volunteers, license applicants, current licensees, and applicants for the rental or lease of housing.

As a prospective or current employee, subcontractor, volunteer, license applicant, current licensee, or applicant for the rental or lease of housing, I understand that a CORI check will be submitted for my personal information to the DCJIS. I hereby acknowledge and grant the WESTPORT FIRE DEPARTMENT permission to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing the WESTPORT FIRE DEPARTMENT with written notice of my intent to withdraw consent to a CORI check.

### FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY:

The WESTPORT FIRE DEPARTMENT may conduct subsequent CORI checks within one year of the date this form was signed by me; however, the WESTPORT FIRE DEPARTMENT must first provide me with written notice of this check.

By signing below, I consent to a CORI check and acknowledge that the information provided on Page 2 of this acknowledgment form is true and accurate.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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“Discrimination against any person in any practice or procedure in advertising, recruitment, referrals, testing, hiring, transfer, promotion or any other term, condition or privilege of employment which limits or adversely affects employment opportunities, because of political or religious opinions or affiliations, or because of race, color, sex, sexual orientation, national origin, marital status, pregnancy, parenthood, age or handicap which is unrelated to the person’s occupational qualifications or any other non-merit factor which is not a bona fide occupational qualification is prohibited.”

It is unlawful in Massachusetts to require a lie detector test as a condition of employment or as a condition of continued employment. An employer who violates that law shall be subject to criminal penalties and civil liabilities.

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