



Lions Bay Fire Rescue
PO Box 141
400 Centre Road
Lions Bay, BC
VoN2E0

604-690-4908
info@lionsbayfirerescue.ca
www.lionsbayfirerescue.ca

2016 Paid On-Call Fire Fighter Application Form

For more information about recruitment process please visit www.lionsbayfirerescue.ca

By check-marking the box, you acknowledge that you meet the requirement and have included the required documentation.

Last Name:

First Name:

Application Requirements (no documentation required)

- No criminal charges or convictions for which you have not received a pardon that are related to the duties of the position
- Legal entitlement to work in Canada
- Application form completed virtually

All documents submitted via email to recruitment@lionsbayfirerescue.ca

Health Requirements (no documentation required)

- Color vision safe
- Normal hearing without artificial aids
- 20/30 corrected binocular vision and 20/100 uncorrected binocular vision or better

Documentation Requirements (submit in the following order)

- Detailed resume and Cover Letter
- NFPA 1001 Level 1 & 2 from accredited college
- Current drivers abstract
- Copy of valid BC Drivers License
- Copy of valid BC First Responders Level III, EMR, PCP Licence (Not Certificate)
- Any additional certificates or qualifications

Signature (Type Name)

Date



Village of Lions Bay
40th Anniversary
Splendour In Serenity



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Contact Information

First Name: _____
Last Name: _____
Email Address: _____
Phone Number: _____
Home Address: _____

Personal Information (All personal information is kept strictly confidential)

Current Employer: _____
Position: _____
Date(s) of Employment: _____
Nature of Work/Duties: _____

BC Drivers License #: _____ Class: _____ Air Brake Endorsement: Y / N

BC Medical #: _____

Allergies or Medical Conditions: _____

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Training

Fire Fighter & Rescue Certifications:

- NFPA 1001 Level 1 & 2: Fire Academy: _____ Date of Completion: _____
S-100 or S-215
- Rope Rescue Level of Training: _____
- Water Rescue Level of Training: _____
- Auto Extrication Level of Training: _____
- Hazmat Level of Training: _____
Confined Space Level of Training: _____

First Aid Certifications: (indicate level)

- OFA Level III or Paramedic In Industry
- First Responders Level III (EMA Licenced)
- EMR (EMA Licenced)
- PCP (EMA Licenced)

Licence/Cert #: _____ Expiry Date: _____

Endorsements: _____

References:

- Included with resume OR
- Detailed below

| Name of employer/organization: | Name & Position: | Phone Number(s): |
|--------------------------------|------------------|------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |





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Why do you want to join our department?

This is your chance to tell us who you are and why you want to join LBFR. Also tell us about any other experience(s) you feel makes you a good candidate (continue of other pages if necessary).



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Applicant's Declaration:

By submitting my application, I certify that the information I am providing in my application for this position is true and complete to the best of my knowledge. I understand that if I provide information in connection with my application which is found to be untrue or incomplete, my application may be rejected and I may be subject to discipline up to and including termination if I am hired as the successful applicant.

I CONSENT: YES NO

Signature (Type Name)

Date

