209 S. Hamilton St. McLean, IL 61754 Business Phone: 309-874-2532

FROM: Mt. Hope-Funks Grove FPD

TO: Potential Mt. Hope-Funks Grove FPD Firefighters, First Responders and EMT's

SUBJECT: Application Process

Attached to this letter you will find a complete application package for the Mt. Hope-Funks Grove Fire Protection District. Please follow the below procedures if you wish to apply for membership within the department.

- 1. Read the introductory letter from the officers of the Mt. Hope-Funks Grove Fire Protection District.
- 2. Read the overview of the Mt. Hope-Funks Grove Fire Protection District.
- 3. Read the firefighter requirement overview very thoroughly. This outlines some of the basic expectations of Mt. Hope-Funks Grove Fire Protection District members.
- 4. Review the initial probation program check sheet.
- 5. Contact any member of the fire department if you have any questions on the printed material. Also feel free to stop by the Mt. Hope-Funks Grove Fire Station on any Monday evening to obtain more information, meet our members, or view our equipment or facilities.
- 6. If you wish to apply, complete all sections of the application form and the information authorization form and return both to:

Mt. Hope-Funks Grove Fire Protection District 209 S. Hamilton St. McLean, IL 61754

7. Your application will be reviewed by our officers and you will be contacted in the very near future to be scheduled for an interview. During the interview process you will be asked several basic questions regarding your background and your interest in the fire service. You will also be given the opportunity to ask any questions you may have concerning the application process or our department operations.

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FROM: Mt. Hope-Funks Grove Fire Protection District Officers

TO: Potential Members of the Mt. Hope-Funks Grove Fire Protection District

The Mt. Hope-Funks Grove Fire Protection District is a Paid-On-Call fire department. We feel that we are an elite organization with goals, policies, performance and a philosophy which ranks us as one of the better paid-on-call fire departments in our area. You must evaluate you commitment to this organization as being one of dedication and performance before acceptance into our organization.

Are you joining just to be around your friends? Is this just a "whim"? Are you joining to just to respond to incidents? Are you joining because you just want to drive the big red trucks? If you answered yes to any of these, you should give more thought prior to filling out the application. There is much more to being a member of the Mt. Hope-Funks Grove Fire Protection District than just responding to incidents.

This department has rules, regulations, policies and guidelines which you <u>MUST</u> follow. This is not a social club. When the pagers go off, you must be thoroughly committed to performing the tasks assigned and required. You cannot perform properly if you have not attended training sessions. Firefighting is one of the most dangerous jobs in the world. It is not a game. It requires all fire department members' total dedication to save lives and protect against the loss of property.

To be a member you <u>MUST</u>: follow the rules; attend meetings and training sessions; participate on special committees; participate in clean-ups and work details; work on special maintenance projects; attend and participate in fund raising activities; be available when you are in the district; and most importantly, respond to all incidents you are called to.

If you are accepted, you must attend additional training sessions to get "up to speed." You will go through a one year probationary period. During this period your performance and attendance will monitored by the department officers. If you do not meet the standard requirements, you will be placed on extended probation or may be asked to resign from the department.

We wish for you to join the Mt. Hope-Funks Grove Fire Protection District, but we require your dedication. Our members are very proud of our organization and we work very hard to improve and streamline all facets of our organization. We guarantee that you will have a special feeling working with this special group of people to save people's lives and properties. We will provide you with training, motivation, protective gear, insurance, and friendship. You provide your personal commitment to excellence and your willingness to serve the community.

Mt. Hope-Funks Grove Fire Protection District

The Mt. Hope-Funks Grove Fire Protection District in McLean, Illinois, is located 28 miles from a nuclear power plant, the Townships of Mt. Hope & Funks Grove, IL are rural communities with a combined year round population of 1,450 residents residing in 96 square miles. The department is contracted to provide structural & wildland firefighting, rescue to the operational level and EMS transport at the BLS level. The department has formal mutual or automatic aid agreements with 30 fire departments protecting an additional 181,076 residents residing in 1440 square miles.

The district's first due response area includes 1 daycare facility, 2 public schools with 1000 students, 1 hotel, 2 low rise apartment buildings, 5 churches and 1 park district building. Transportation risks include 3 high speed highways encompassing 34 square miles with a daily traffic count of 33,000 vehicles, 10 miles of rail line transporting passengers, freight and hazmat materials 15 times daily and a private airport with 2 runways with 50 flights per year. In addition, the district sees an influx of visitors that include the Funks Grove Rest Area with 1.2 million visitors per year, the Sugar Grove Nature Center with 25,000 visitors per year and the Funk Prairie Home with 6,500 visitors per year.

The department operates two (2) 1,000 GPM pumpers, a 1,500 tanker, utility/brush truck and a BLS ambulance out of a single station. The department maintains state of the art equipment including a hydraulic rescue tool system, large diameter hose, the latest protective gear for firefighters, and a complete compliment of firefighting tools and support equipment.

The Mt. Hope-Funks Grove Fire Department has averages approximately 200 calls per year. Our response capabilities include fire suppression (structure fire, vehicle fires, brush fires, etc.) utility emergencies (gas leaks, electrical emergencies), smoke investigations, carbon monoxide investigations, motor vehicle rescue, water rescue, technical rescue (trench, confined space, agricultural, etc.), disaster response and basic life support transport ambulance. The bulk of the incidents the department responds to are medical emergencies, vehicle accidents and other calls for service. The department responds to an average of one working structure fires per year.

The Mt. Hope-Funks Grove Fire Protection District is a taxing district in Mt. Hope and Funks Grove Townships. Each household within the fire protection district is taxed a basic rate. All funds collected are administered through a district board. The three-person board manages the financial and legal dealings of the fire protection district. The funds accumulated through taxes are used to buy new equipment, pay for maintenance of current equipment, and pay for two EMT's to staff ambulance during the day and some of the night and weekends.

Additional funds for the department are generated through fund raising efforts of the volunteers. The volunteers take part in a number of fund raising projects throughout the year. All funds collected are used for department activities or to purchase new equipment.

The Mt. Hope-Funks Grove Fire Protection District/Mt. Hope-Funks Grove Fire Department has a long history in the Mt. Hope-Funks Grove area. The department has been providing quality emergency services to the public for over 85 years.

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Firefighter Requirements Overview

- Personnel shall meet all the application requirements of the Mt. Hope-Funks Grove Fire Department and the Mt. Hope-Funks Grove Fire Protection District as outlined in the Constitution and Bylaws.
 - Residency in the Mt. Hope-Funks Grove Fire Protection District or just outside of the district with approval from Fire Chief
 - 18 years of age.
 - Work does not require constant travel outside the district limits.
 - Obtain class B non-CDL driver's license within 120 days of acceptance into department.
 - MUST PASS BACKGROUND CHECK
- Personnel shall become proficient in: driving all department vehicles to which you could be assigned; use of all emergency equipment of the department; operating pumps and portable equipment.
 - Training in this area will be provided by the department.
 - Standard operating guidelines on driving, equipment use, and department operations will be forwarded to you upon acceptance into department.
- Personnel shall have a working knowledge of basic first aid and CPR.
 - Training in this area will be provided by the department.
 - Maintain current CPR certification throughout employment.
 - Most emergency medical care at incident scenes is provided by the Mt. Hope-Funks Grove Ambulance.
- Firefighters shall attend training sessions to learn proper techniques for all emergency operations, i.e. rescue, vehicle extrication, fire attack, etc.
 - The department will provide training in all areas of fire department operations.
 - All firefighters are expected to attend a minimum of 36 hours of training per year. Officers are expected to attend additional training sessions per year.
 - Training sessions are offered 4th Monday evening starting at 7:00 pm at lasting approximately 2-3 hours.
 - The more training you attend the more comfortable you will feel with department operations
 - The department uses extensive outside agencies to provide training. This includes the Illinois Fire Service Institute, the Illinois State Fire Marshal Certification Programs, the Illinois Emergency Management Agency, etc.
 - Obtaining certifications is considered advantageous for firefighters.
- EMS personnel shall attend training sessions to learn proper techniques for all emergency operations, i.e. rescue, vehicle extrication, etc.
 - The department will provide training in all areas of EMS operations.
 - All EMS personnel are expected to attend a minimum of 24 hours of training per year.
 - Training sessions are offered 3rd Monday evening starting at 7:00pm and lasting approximately 2-3 hours.
 - The more training you attend the more comfortable you will feel with department

operations.

- The department uses extensive outside agencies to provide training. This includes the Illinois Fire Service Institute, the Illinois State Fire Marshal Certification Programs, the Illinois Emergency Management Agency, Illinois Department of Health etc.
- Obtaining certifications is considered advantageous for EMS Personnel.
- Personnel shall respond to all alarms as expediently as safety allows. Personnel are expected to
 respond to all alarms that they are available to respond to with the exception of calls that
 interfere with work and family commitments.
- Personnel shall adhere to Department Standard Operating Guidelines, Policies, Constitution and Bylaws. A copy of the constitutions, bylaws and standard operating procedures will be forwarded to you upon acceptance into the department.
- Personnel shall assist in work details, fundraisers, and upkeep and maintenance whenever possible.
 - Work at the yearly Fourth of July celebration
 - Other special fundraisers as deemed necessary for department functions.
 - Work details are held once per month on Monday evenings.
 - Other special work details as deemed necessary for upkeep of equipment.
- Personnel shall attend all meetings, drills and trainings possible.
 - Officer Meeting First Monday of every month
 - Business Meeting/Work detail Second Monday of every month
 - EMS Training Third Monday of every month Licensed EMS Personnel Only unless you are notified to attend for mandated training.
 - Fire Training Fourth Monday of every month.
- Personnel shall follow the orders of Senior Firefighters or Officers. A standard chain of command has been established within the department. You are expected to follow this chain of command.
- Personnel shall maintain conduct and appearance so as to reflect on the department in a manner promoting good relations with all concerned. Any foul conduct will be dealt with as a severe infringement of departmental regulations. Probation, suspension, or termination may be imposed depending on the severity of the problem.
- Personnel shall relay any information which affects their firefighting duties to officers. This includes such information as health problems, residency, employment status, etc.
- Personnel will maintain all equipment assigned to them in a ready state.
 - Personnel will receive a complete set of bunker gear, uniform shirt, and pager upon the completion of your initial probation.
 - Personnel are expected to maintain the equipment and report any damaged or lost equipment immediately.
 - Upon termination or resignation from department, all equipment must be returned. Any equipment not returned will be billed to the individual at replacement value.
- All personnel will receive standard benefits. These benefits will include the following:
 - Insurance (work comp, accident, death)
 - Social events

Compensation for responding to calls, attending meetings and trainings. This is subject to be revoked at any time at the digression of the Trustees and/or Fire Chief for any reason.

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Probationary Personnel Requirements

Name:		Entry D	ate:
			,
Required Action	Date Cor	npleted	Approver Initials

Required Action	Date Completed	Approver Initials
Attend initial orientation class.		
Assigned to a mentor.		
Meet all department officers.		
Receive tour of our facilities and equipment		
Complete required documentation (insurance, Benefit, basic information, etc.)		
Receive initial safety briefing.		
Review policies and guidelines (constitution and bylaws, standard operating guidelines, maps, etc.)		
Receive probationary personnel checklist. Complete all aspects during probationary period.		
Acquire class B non-CDL driver's license within 120 days of acceptance.		
Receive medical evaluation.		
Complete hepatitis B vaccine requirements		
Issued gear/equipment and pager		
Attend officers meeting at 6 month and 1 year intervals of probationary period.		

Completed form will be maintained in personnel file.

Mt. Hope-Funks Grove Fire Protection District Application

Name (First, Middle Initial, Last):			
Home Address:			
Home Phone:	Birth Date:		
Driver's License Number:	Social Security Number:		
Marital Status:	Spouses Name:		
Present Employer:			
Employer Address:			
Occupation:	Immediate Supervisor:		
Work Phone:	Typical Work Shift:		
Does your job require frequent travel out of the area?		Yes	No
If you work in the Mt. Hope-Funks Grove area, will you be able to respond		Yes	No
during work? Will your work shift hinder you from attending evening trainings sessions?		Yes	No
Education (Circle highest grade completed) 8 9 10	11 12 Some	College Colle	ege Degree
High School Attended:			
College/Technical School Attended:			
College Degree/Major:			
Current Medical Condition: Excellent Good	Fair	Poor	
List any medical conditions which may lead to an emergency etc.)	situation (examples: l	high blood press	ure, diabetes, allergies,
Personal Physician:	Hospital:		
Emergency Contact Name:	Relationship:		
Contact Home Phone: Contact Wo		ne:	

			
Name of Organization:			
Date of Service:		Position Held:	
List any emergency response recompleted:	elated training, firefighting ce	rtification or med	ical license/certifications you have
List any current Mt. Hope-Funl	ks Grove Fire Protection Dis	trict personnel wh	o you are related to or acquainted with:
References (List three reference	•	education or wor	k experience)
Name	Address		
Have you ever been arrested, su probation, or has any case been			convicted, fined, imprisoned, or place on
ist any comments and/or info	motion which you feel is per	tinent to your ann	liantian propaga
List any comments and/or infor	rmation which you feel is per	tinent to your app	lication process:
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Mt. Hope-Funks Grove Fire Protection District 209 S. Hamilton St. McLean, IL 61754

Background Check Authorization

I authorize the Mt. Hope-Funks Grove Fire Protection District, any consumer reporting agency or other outside service company engaged by said district for this purpose, now and subsequently, to obtain, prepare, use and furnish information concerning my current and former employment, education, credit, general reputation, health, personal characteristics and mode living, through correspondence or personal interviews with neighbors, friends or associates or others with whom I am acquainted or who may have knowledge concerning any of the above items.

I further authorize the Mt. Hope-Funks Grove Fire Protection District to obtain information form the Illinois State Police, the Federal Bureau of Investigation, the Illinois Secretary of State, or any other federal, state or local police or other agency regarding me in order to perform a criminal history/arrest record/driving record and background check.

I understand that if I am permitted to commence participation as personnel for the Mt. Hope-Funks Grove Fire Protection District prior to receipt of the foregoing information, my employment is completely conditional and may be revoked in the event of any adverse information is obtained.

A copy of this authorization shall be sufficient for any party to release forgoing information about me to the Mt. Hope-Funks Grove Fire Protection District.

Upon written request I understand that said district will provide me with information regarding the scope of the investigation if one is made. I understand that reasonable efforts will be made by the Mt. Hope-Funks Grove Fire Protection District to maintain any information which is obtained by means of this Authorization on a confidential basis with disclosure to be made only as needed to evaluate my qualifications for volunteer firefighter membership in the Mt. Hope-Funks Grove Fire Protection District, however, I agree that I will release and hold the Mt. Hope-Funks Grove Fire Protection, its officers, employees, and department members harmless with respect to any use, release, or dissemination of any information gathered by pursuant to this Authorization.

Signature:	Witness:	
Applicant		
Printed Name		
Address		