

# **CITY OF CRYSTAL LAKE FIRE RESCUE DEPARTMENT**

## **Requirements and Instructions for the positions of Full-Time FIREFIGHTER/PARAMEDIC and/or Paid-On-Premise FIREFIGHTER/PARAMEDIC**

### **FIREFIGHTER/PARAMEDIC MINIMUM REQUIREMENTS:**

- \$25.00 non-refundable application fee
- U.S. Citizenship
- No Felony Convictions
- High School Diploma or equivalent (GED)
- Valid Driver's License
- Illinois Department of Public Health (IDPH) EMT-Basic License
- MUST possess a current and valid CPAT Card issued by a licensed agency no more than 12 months PRIOR to written exam date (CPAT cards must be dated from 6/29/12 through 6/29/13)
- MUST possess a current and valid Ladder Climb Certificate issued by a licensed agency no more than 12 months PRIOR to written exam date (Ladder Climb Certificate must be dated from 6/29/12 through 6/29/13)
- **Full-Time applicants required to be IDPH EMT-Paramedic Certified by date of hire**
- Applicant must be 21 years of age at time of application deadline, and UNDER 35 years of age at time of application deadline AND at such time as the initial eligibility list is established, except as otherwise determined by State Statute.
- Upon completion of the 12 month probationary period, residency required within one of the following Illinois counties: McHenry, Boone, Lake, Cook, DuPage, Kane, DeKalb and must be north of Route 38.
- Meet Visual Acuity Standard of 20/100 in each eye uncorrected, correctable to less than 20/40 and able to meet vision standards (NFPA 1582).

**You MUST meet the above minimum requirements, complete the online application AND confirm its contents by the application deadline, Tuesday, June 4, 2013 at 12 noon. You must also have all required documents (see checklist) and the release forms signed, witnessed, dated and submitted to Public Safety Recruitment BEFORE the deadline, Tuesday, June 4, 2013 at 12 noon. All portions of the testing process are mandatory. Failure to attend and successfully complete any portion of the process will result in elimination from employment consideration.**

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### **SALARY:**

<b>Full-Time Position:</b>	\$58,197.80 annually (effective 5/1/13)
<b>Paid-on-Premise Position:</b>	Training Rate: \$8.25/hr; Regular Rate: \$15.50-17.00/hr., depending on certifications.

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# **CITY OF CRYSTAL LAKE FIRE RESCUE DEPARTMENT**

## **APPLICATION INSTRUCTIONS:**

- 1) Visit [www.publicsafetyrecruitment.com](http://www.publicsafetyrecruitment.com) to complete the online application\* for the position of Firefighter/Paramedic. Online applications must be confirmed by 12 noon on Tuesday, June 4, 2013. You will receive a confirmation number once your application is complete; save this number for your records.

**\*NOTE: You will have the option to complete an online application for the:**

- Full-Time Firefighter/Paramedic Position
- Paid-On-Premise Firefighter/Paramedic Position
- BOTH Full-Time and Paid-On-Premise Firefighter/Paramedic Positions

**COMPLETE THE ONE APPLICATION THAT APPLIES TO YOUR EMPLOYMENT INTEREST.**

- 2) Return signed Release Forms (attached) and other Required Documents (see Checklist) to Public Safety Recruitment before noon on Tuesday, June 4, 2013. Documents received after the deadline will NOT be accepted. Postmarked or faxed documents will NOT be accepted. Traceable carrier is highly suggested for timely delivery. You may deliver documents by hand to Public Safety Recruitment during business hours (M-Th 9a-5p; F 9a-3p; CLOSED HOLIDAYS AND WEEKENDS).
- 3) Applicants must submit proof that they have passed the CPAT and Ladder Climb with a licensed agency within 12 months PRIOR to written exam date (6/29/13). CPAT cards and Ladder Climb certifications are ONLY considered valid if dated from 6/29/12 through 6/29/13. CPAT and Ladder Climb testing is available at the Northeastern Illinois Public Safety Training Academy (NIPSTA) in Glenview, IL and at the Southwest United Fire District (SUFD) in Indianhead Park, IL as well as other certified testing locations. Please visit [www.NIPSTA.org/CPAT](http://www.NIPSTA.org/CPAT) or [www.SUFD.org](http://www.SUFD.org) for information and to register.
- 4) Attend Orientation and Written Exam Battery on Saturday, June 29, 2013 at Prairie Ridge High School, 6000 Dvorak Drive, Crystal Lake, IL 60012. Arrive by 12:30 p.m. with your driver's license or state ID to sign-in. Those taking the CPAT and Ladder Climb AFTER 6/4/13 MUST bring photocopies of valid CPAT card and Ladder Climb Certificate to sign-in as well. Mandatory Orientation will start promptly at 1:00 p.m. and the written examination will immediately follow. No late admittance! A study guide for the written exam (NFSI) is available by calling (708)410-0100 or by visiting [www.publicsafetyrecruitment.com](http://www.publicsafetyrecruitment.com).

Those passing the written exam battery will be eligible to participate in an oral interview. Notification letters will be sent out the week of July 8, 2013 via email and postal mail. The date and time of your interview will be included.

## CHECKLIST: City of Crystal Lake Fire Rescue Department

<b>Online Application:</b> <input type="checkbox"/> <b>Confirmed</b> online at <a href="http://www.publicsafetyrecruitment.com">www.publicsafetyrecruitment.com</a> . (A confirmation page immediately follows the references section of the online application.)	<b>Deadline: June 4, 2013 at noon</b> <b>WRITE YOUR CONFIRMATION NUMBER HERE: _____</b>
<b>Release Forms: (Attached) READ CAREFULLY</b> <small>*No photocopies or fax copies will be accepted. You must submit the ORIGINAL DOCUMENTS WITH ORIGINAL SIGNATURES. Acceptable witness signatures include <i>adult</i> family members and friends. Physical Fitness Certificate requires the ORIGINAL signature of a Medical Doctor.</small>	<b>Deadline: June 4, 2013 at noon</b>
<input type="checkbox"/> <b>Consumer Reports*</b> <input type="checkbox"/> <b>Alcohol, Drug and Substance Abuse Screening*</b> <input type="checkbox"/> <b>Criminal History Information/ Fingerprint*</b> <input type="checkbox"/> <b>Driving Record*</b>	<input type="checkbox"/> <b>Employment Past and Present*</b> <input type="checkbox"/> <b>High School, College, University Diploma*</b> <input type="checkbox"/> <b>Medical Records*</b> <input type="checkbox"/> <b>Personal Information Release to Municipality*</b> <input type="checkbox"/> <b>Written Examination*</b> <input type="checkbox"/> <b>EEO Questionnaire (Optional)</b>
<b>Other Required Documents:</b>	<b>Deadline: June 4, 2013 at noon</b>
<input type="checkbox"/> <b>COPY of valid IDPH EMT-Basic License (Paramedic License required by date of hire for FT applicants)</b> <input type="checkbox"/> <b>COPY High School Diploma or Equivalent</b> (Copy of High School Transcripts with Graduation Date, Dated GED, or Signed Letter on High School letterhead is acceptable. College diploma/transcripts are NOT acceptable to fulfill this required document.) <input type="checkbox"/> <b>COPY of valid Driver's License</b> (copy of front and back if you received a renewal sticker) <input type="checkbox"/> <b>COPY Birth Record ~ READ CAREFULLY:</b> Must contain the applicant's full name and date of birth and must be verifiable. To be verifiable, it must be possible to contact the regulatory authority to confirm the authenticity of the document. <b>ONE OF THE FOLLOWING IS ACCEPTABLE AND REQUIRED TO FULFILL THE BIRTH RECORD REQUIREMENT:</b> <input type="checkbox"/> <b>Copy of <u>US</u> Birth Certificate</b> (Copy of original or certified by a Board of Health or Bureau of Vital statistics within the U.S. State Department or U.S. territories. <b>Hospital copy NOT accepted.</b> ) <b>OR</b> <input type="checkbox"/> <b>Copy of valid US Passport</b> <b>OR</b> <input type="checkbox"/> <b>Copy of Naturalization Papers</b> <input type="checkbox"/> <b>COPY of Military Discharge Certificate DD-214 (if applicable)</b>	
<b>CPAT and Ladder Climb Certification:</b>	<b>Deadline: June 4, 2013 at noon OR Bring with on Test Day</b>
<input type="checkbox"/> <b>COPY of CPAT Card issued within 12 months <u>PRIOR</u> to written exam date</b> <input type="checkbox"/> <b>COPY of Ladder Climb Certificate issued within 12 months <u>PRIOR</u> to written exam date</b> <p style="text-align: center;">(CPAT/Ladder Climb considered valid only if issued from 6/29/12 through 6/29/13)</p> <p>IF CPAT AND LADDER CLIMB CERTIFICATIONS ARE ISSUED <u>BEFORE</u> DEADLINE AND ARE VALID, SUBMIT THESE DOCUMENTS BY 12 NOON ON 6/4/2013.</p> <p>CANDIDATES TAKING THE CPAT AND LADDER CLIMB CERTIFICATION <u>AFTER</u> THE DEADLINE ARE REQUIRED TO BRING COPIES OF BOTH CERTIFICATIONS WITH THEM ON TEST DAY TO SIGN-IN.</p>	
<b>NOTE: <u>OFFICIAL</u> College or University Transcripts and copy of Military Discharge DD-214 (long form) will be required to qualify for preference points. They will be requested at establishment of eligibility list.</b>	

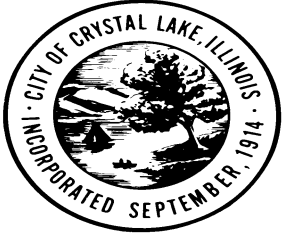
Applications will not be verified until after the deadline has passed. Candidates who submit applications lacking proper documentation as indicated above will not be admitted to orientation or testing and you will be eliminated from employment consideration. I/O Solutions, d.b.a. Public Safety Recruitment, is not responsible for late, misdirected or incomplete application submissions. You must submit all required documents and have successfully CONFIRMED your online application by the deadline in order to be eligible to attend any portion of testing. You may drop your application documents off in person or by mail; however, all documents including your online application are due by the deadline as indicated.

Call 1.800.343.HIRE or email [info@publicsafetyrecruitment.com](mailto:info@publicsafetyrecruitment.com) with questions.

**SUBMIT ALL RELEASE FORMS AND OTHER REQUIRED DOCUMENTS TO:**

**PUBLIC SAFETY RECRUITMENT**  
**ATTN: CL FIRE**  
**1127 S. MANNHEIM ROAD, SUITE 203**  
**WESTCHESTER, IL 60154**

**DO NOT SUBMIT REQUIRED DOCUMENTS TO THE CITY OF CRYSTAL LAKE.**



# City of Crystal Lake, Illinois

<b>Estimated Population:</b>	40,743 (2010 Census)
<b>Square Miles:</b>	18.7
<b>Fire Protection Dist. Population:</b>	60,000
<b>Fire Protection Dist. Square Miles:</b>	45
<b>Households:</b>	15,176
<b>Median home price:</b>	\$227,300
<b>Mean household income:</b>	\$87,493
<b>Schools:</b>	9 Public Elementary Schools 3 Public Middle Schools 3 Public High Schools 4 Parochial Elementary Schools 1 Parochial High School 1 Private K-8 School McHenry County College, Columbia College of MO. And Webster University
<b>Churches:</b>	38 Churches - 26 Denominations

Crystal Lake, Illinois, located 50 miles northwest of Chicago, is a short drive from O'Hare International Airport, near several major highways and interstates. Metra commuter rail provides easy access to Chicago's Loop. The City boasts over 2.3 million square feet of retail shopping center space, and provides nearly 12,000 jobs through a large commercial, office and industrial base. The City of Crystal Lake is home to over one thousand acres of dedicated parks and open space where residents and visitors can enjoy golf, tennis, baseball, football, swimming, cycling and hiking in well-maintained, accessible areas. The Three Oaks Recreation Area provides swimming, hiking, fishing, boating and more in unique, natural environment with pristine, clear waters.

## Local Attractions, Festivals and Events

- Crystal Lake beaches and water sports
- Raue Center for the Arts, featuring major Broadway productions, community theater, music and more!
- America's Cardboard Cup Regatta
- Historical Downtown District
- Antiquing at local shops
- Excellent hotel accommodations
- Over 50 local restaurants
- Numerous fitness and exercise centers
- Half-Marathons, triathlons, and 5K Runs, including the Big Woolly Adventure Race, Bob Blazier Run for the Arts and more!
- Regal Cinema Theater
- Indoor ice skating at The Crystal Ice House
- The historic Dole Mansion
- Colonel Palmer House (Museum & Archives)
- Housewalks featuring local architecture
- Farmer's Market
- Walkup Heritage Farm
- Night Clubs, Pubs and Eateries
- Chili Open Winter Golf Tournament
- Top-Quality Local Golf Courses
- Indoor playgrounds, rock climbing center
- Over 50 miles of local bike paths
- Major Festivals/Events
  - RibFest at Main Beach
  - Lakeside Festival at the Dole Mansion
  - Independence Day Parade and Fireworks
  - Memorial Day Parade
  - Johnny Appleseed Festival
  - Festival of Lights Parade
- National Night Out
- .....and much more!

# CITY OF CRYSTAL LAKE FIREFIGHTER/PARAMEDIC JOB DESCRIPTION

**Effective Date:** June 20, 2005  
**Position Code:** 0303  
**FLSA Status:** Non-Exempt  
**Pay Range:** See CBA

## NATURE OF WORK

*Note: Paid on Premise personnel are exempt from the portions of the following job description that are not applicable to their positions.*

This is skilled firefighting work combating, extinguishing and preventing fires and providing emergency medical rescue services to protect life and property.

Work involves performing hazardous tasks under emergency conditions, which may require strenuous exertion under such handicaps as fire, heat, smoke, and cramped surroundings. Although firefighting and rescue work, and responding to emergency medical calls, are the most difficult and responsible areas of activity, a major portion of time is spent studying methods and techniques of fire prevention and suppression and basic and/or advanced life saving techniques. Work also involves routine maintenance of fire department equipment, apparatus, and quarters and driving equipment when specifically assigned. Work is performed under the command of an officer. Work is reviewed in progress and upon completion.

## EXAMPLES OF ESSENTIAL JOB FUNCTIONS

- Responds to fire alarms and other emergency calls; controls and extinguishes fires, protects life and property.
- May select hose nozzle, depending on type of fire, lays firelines, and directs stream of water or chemicals onto fire; positions and climbs ladders to gain access to upper levels of building or to assist individuals from burning structures; creates openings in buildings for ventilation or entrance, using axe, chisel, crowbar, saw, and other power equipment; and may deactivate utility services to prevent explosions or other fire breakouts.
- Participates in salvage operations, such as removing and covering furniture, removing water, and cleaning debris.
- Performs overhauling operations to ensure that the fire is completely extinguished.
- Develops preplans that provide the most effective firefighting methods for target hazards.
- May investigate causes and circumstances surrounding fires.
- Participates in a continuing program of training and instruction and attends drills, demonstrations, and classes; receives training in the operation of fire and rescue equipment and apparatus and, when assigned, drives and operates a variety of fire equipment; maintains physical ability to perform duties.
- May maintain and repair self-contained breathing apparatus; tests equipment using testing devices; maintains and repair nozzles; and stocks parts for units.
- Responds to medical and non-medical emergency situations; drives emergency vehicles to the scene.
- Provides efficient and immediate emergency care to the ill or injured at the scene of an incident and during transport; operates emergency care equipment.
- Conducts examinations, determining and evaluating the nature and extent of the problem, illness, or injury based on statements of persons involved, vital signs, examination, and diagnosis of ill or injured person; documents patient's complaints and all vital signs; records care rendered.
- Administers appropriate basic or advanced life support care at site of emergency; performs such activities as treating wounds, abrasions, and shock; applies splints; suctions airways, administers oxygen, and operates resuscitator.
- Performs specialized emergency cardiac treatment and care, including operation and interpretation of EKGs and heart monitoring equipment; administers drugs and IVs; performs defibrillation when necessary; may perform advanced medical care.
- Reports vital information regarding care and condition to medical personnel receiving patient.
- Provides fire station tours for the public; answers questions and provides public education services.
- Performs general maintenance work in the upkeep of fire stations buildings and grounds; fire apparatus, auxiliary equipment, and tools; tests, flushes, paints hydrants, and clears areas around fire hydrants.
- Maintains accurate records, forms, and reports.
- Provides effective and efficient customer services and promotes and maintains responsive community relations.
- Serves as Acting Lieutenant as necessary.
- Follows safe work practices.

## OTHER JOB FUNCTIONS

- May perform on special teams such as Haz Mat, TRT, and SRT, which would require special training.
- Performs related duties as assigned.

## **REQUIREMENTS OF WORK**

- Graduation from high school (or GED) supplemented by experience working as an EMT, Paramedic or in a similar area; or any equivalent combination of training and experience which provides the following knowledge, abilities, and skills:
- Knowledge of modern rescue and firefighting principles, practices, and procedures.
- Knowledge of the operating and maintenance requirements of the various types of apparatus and equipment used in firefighting activities.
- Knowledge of the physical layout of the City, including fire hydrant and street locations in the district to which assigned.
- Knowledge of emergency medical and rescue procedures.
- Ability to read and understand policies, rules, instructions, and written material of the Fire Department.
- Ability to perform limited mechanical work involved in maintaining fire apparatus, equipment, and tools.
- Ability to analyze emergency situations and to adopt effective courses of action.
- Ability to learn, train, and retain technical and other fire service related data.
- Ability to effectively work in a "shift" environment.
- Ability to operate a personal computer with the software and programs necessary to perform the work of the department.
- Ability to compose and write accurate reports and records
- Ability to meet the physical requirements of the position.
- Ability to establish and maintain effective working relationships with other employees, and the public.
- Ability to communicate effectively, orally and in writing.
- Skill in the operation of fire equipment, tools, and apparatus, and in making minor adjustments and repairs.

## **NECESSARY SPECIAL REQUIREMENTS**

- Firefighter II, as mandated by the Office of the Illinois State Fire Marshal.
- Possession of a valid Illinois driver's license with appropriate classification for fire apparatus.
- Illinois State Licensed Paramedic.
- Haz Mat Ops certification from the Office of the Illinois State Fire Marshal.

## **PHYSICAL DEMANDS**

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- While the duties of this job, the employee is frequently required to sit; talk or hear; stand; walk; use hands to finger, handle, or operate objects, tools, or controls; and reach with hands and arms. The employee is occasionally required to climb or balance; stoop, kneel, crouch, or crawl; and smell.
- Specific vision ability required by this job includes close vision, distance vision, color vision, peripheral vision, depth perception, and the ability to adjust focus.
- While performing the duties of this job, the employee frequently works in outside weather, in all conditions, including temperature extremes, during day and night. Work may be performed in emergency and stressful situations. Individual is exposed to loud alarms and hazards associated with fighting fires and rendering emergency medical assistance, including smoke, noxious odors, fumes, chemicals, liquid chemicals, solvents and oils, risk of electrical shock, and blood borne pathogens.
- Ability to wear personal protective equipment that weighs greater than 50 pounds while performing various strenuous tasks such as firefighting, rescue or other related tasks
- Ability to operate in environments of high noise, poor visibility, limited mobility, at height and in enclosed or confined spaces
- Ability to advance and drag hoses up to three inches in diameter, both charged and uncharged up to 100 feet both horizontally and vertically
- Ability to make rapid transitions from rest to near maximal exertion
- Ability to carry and raise a 28 foot extension ladder without assistance
- Ability to work in a restricted area for two or more hours at a time
- Ability to raise, climb and work from ground and aerial ladders without fear of heights inhibiting work
- Ability to lift and carry a stretcher with an adult patient weighing at least 165 pounds, up or down stairs with a partner
- Ability to proofread and check documents for errors
- Ability to perform unpleasant duties and deal with hazardous situations
- Ability to spend extensive time outside exposed to the elements
- Ability to work in wet, icy or muddy areas and to perform a variety of tasks on slippery, hazardous surfaces such as rooftops or from ladders

**PLEASE PRINT:**

LAST NAME .....FIRST NAME.....SSN.....

**POSITION(S) I AM APPLYING FOR: (CHECK ONE!)**

- FULL-TIME FIREFIGHTER/PARAMEDIC ONLY**
- PAID-ON-PREMISE FIREFIGHTER/PARAMEDIC ONLY**
- BOTH FULL-TIME AND PAID-ON-PREMISE FIREFIGHTER/PARAMEDIC**

**IMPORTANT NOTICE TO APPLICANT: PLEASE READ THIS NOTICE AND CONSENT FORM CAREFULLY BEFORE SIGNING. YOU WILL BE PROVIDED WITH A COPY OF THIS FORM AT ANY TIME UPON REQUEST**

**NOTICE AND CONSENT CONCERNING CONSUMER REPORTS FOR EMPLOYMENT PURPOSES**

This form, which you should read carefully, has been provided to you because I/O Solutions, Inc. (hereinafter referred to as "the Company") or the Department(s) to whom you request the Company to forward your application (hereinafter referred to as "the Department(s)") may request consumer reports or investigative consumer reports. Any requests for consumer reports or investigative consumer reports from the Company will be made on behalf of any or all of the Department(s). The consumer reports or investigative consumer reports may then be reviewed by any or all of the Department(s).

For the benefit of the Department(s), the Company may perform applicant background checks and employee investigations. These background checks and investigations may be performed by the Company, in whole or in part, at the Company's discretion. The Department(s) may also perform applicant background checks and employee investigations. These background checks and investigations may be performed by the Department(s), in whole or in part, at the discretion of the Department(s).

The Company's and Department(s)' background checks may also include the use of consumer reporting agencies to gather and report information in the form of consumer or investigative consumer reports regulated by federal law. Such reports, if obtained, will be prepared by consumer reporting agencies and may contain information concerning your credit standing or worthiness, character, general reputation, personal characteristics, or mode of living. Federal law defines a "consumer reporting agency" as any person (or entity) which for monetary fees, dues, or on a cooperative nonprofit basis, regularly engages in whole or in part in the practice of assembling or evaluating consumer credit information or other information on consumers for the purpose of furnishing reports to third parties. The Company is not a consumer reporting agency nor are the Department(s).

The types of reports that may be requested from consumer reporting agencies under this policy, include, but are not limited to, credit reports, criminal records checks, court records checks, driving records, and/or summaries of educational and employment records and histories. The information contained in these reports may be obtained by a consumer reporting agency from public record sources or through personal interviews with your co-workers, neighbors, friends, associates, current or former employers, or other personal acquaintances. Any information contained in such reports may be taken into consideration by the Department(s) in evaluating your suitability for employment, promotion, reassignment or retention as an employee. Any information contained in such reports may be used for other purposes required by law or ethical business practices.

If the Company or Department(s) request(s) an investigative consumer report to be performed by a consumer reporting agency, as defined by federal law, you will receive a notice indicating that the report has been requested no later than three days after the request is made to the agency. This additional notice, if issued, will provide you with further information pertaining to federal law governing investigative consumer reports. You will not receive such a notice if the investigation is performed by the Company or a person or entity other than a consumer reporting agency.

If any adverse decision is made with regard to your application for employment or subsequent employment by a Department(s), based entirely or in part on the information contained in a consumer report or investigative consumer report prepared by a consumer reporting agency, the Department(s) are required to notify you and give you a copy of the report, as well as a summary of your applicable rights. If you have ever filed for bankruptcy, the Department(s) may not base an employment decision solely on this information.

Your consent is required by law before the Company or the Department(s) may obtain a consumer report or investigative consumer report from a consumer reporting agency pertaining to your submission of an application for employment with a Department. Your signature below indicates that you have carefully read and understand that the Company and the Department(s) may request and review a consumer report or investigative consumer report regarding you, consistent with this policy, in connection with your application for employment and that you consent to the release of such consumer reports or investigative consumer reports to the Company and the Department(s) for employment purposes, including any future decisions concerning your employment, promotion, reassignment or retention. You also consent to release of this information to the Company and the Department(s) for other purposes required by law or ethical business practices. Your signature additionally reflects your understanding that such consent will remain in effect indefinitely until you revoke it (cancel it) in writing, as described below.

Refusal to consent to a consumer report or investigative consumer report as required by this notice may result in rejection of an application, or withdrawal of an offer of employment.

**CONSENT STATEMENT**

I have carefully read and understand this notice and consent form and, by my signature below, consent to the release of consumer or investigative consumer reports, as defined above, to the City of Crystal Lake or I/O Solutions, Inc. (hereinafter referred to as "the Company") (and thereby to the departments to whom I have requested the Company to forward my application (hereinafter referred to as "the Department(s)"). I further understand that this consent will remain in effect until revoked in a written document signed by me. In the event that I wish to refuse or revoke my consent at any time, I understand that I may do so by either signing the Refusal or Revocation of Consent Statement below and returning it to the Company, at 1127 S Mannheim Rd, Suite 203, Westchester, IL 60154, or sending a signed letter or statement to the Company at the same address, indicating that I revoke my consent to the Company's obtaining consumer reports or investigative reports about me for employment purposes. I further understand that any and all information contained in my job application or otherwise disclosed to the City of Crystal Lake or to the Company by me may be utilized for the purpose of obtaining the consumer reports or investigative consumer reports requested by the Company and confirm that all such information is true and correct.

\_\_\_\_\_  
Name of applicant (Printed)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

<p><b>REFUSAL OR REVOCATION OF CONSENT STATEMENT <u>DO NOT SIGN UNLESS YOU HAVE DECIDED THAT YOU WILL NOT CONSENT</u>, OR WILL NO LONGER CONSENT TO THE CITY OF CRYSTAL LAKE OR THE COMPANY OBTAINING CONSUMER REPORTS OR INVESTIGATIVE CONSUMER REPORTS REGARDING YOU FOR EMPLOYMENT OR OTHER PURPOSES.</b></p>		
<p>I do not consent to the City of Crystal Lake or I/O Solutions, Inc. (hereinafter referred to as "the Company") obtaining consumer reports or investigative reports about me in connection with my employment or any other purposes. If I have previously granted my consent, I hereby revoke it and understand that such revocation will take effect immediately after the Company receives this written revocation and has actual knowledge of it sufficient to communicate the revocation to those employees or agents of the Company who typically request consumer reports for the Company.</p>		
_____ Candidate Name	_____ Candidate Signature	_____ Date
<p><b><u>DO NOT SIGN THIS PORTION UNLESS YOU DO NOT CONSENT</u></b></p>		



## ALCOHOL, DRUG AND SUBSTANCE ABUSE SCREENING

### CONSENT

I hereby consent for the City of Crystal Lake or I/O Solutions, Inc., or either of its authorized representatives to collect blood, urine or saliva samples from me and to conduct other necessary medical tests to determine the presence in my body or use by me of alcohol, drugs or controlled substances.

I understand that the presence of certain medications in my blood and/or urine may affect test results. To aid in the analysis of the test results I would like to inform the City of Crystal Lake, I/O Solutions, Inc., and either of its authorized representatives that I have taken the following medications in the last seven (7) days:

\_\_\_\_\_

\_\_\_\_\_.

### RELEASE

I understand that release of my medical records by this written authorization will result in disclosure of these test results. I hereby consent to the release of the test results and other relevant medical information to authorized representatives of the City of Crystal Lake and I/O Solutions, Inc., its directors, officers, staff, employees, agents, representatives and assignees from any and all claims, demands, actions, fees and causes of action, suits at law, proceedings in equity, and liability that may arise by reason of the drug, alcohol and substance abuse screening or due to the disclosure of the test results as authorized herein by me.

Agreed to:	_____		Date _____
	Applicant Name, printed		
	_____		Date _____
	Applicant Signature		
	_____		Date _____
	Witness Name, printed		
	_____		Date _____
	Witness Signature		

**DO NOT SUBMIT WITHOUT OBTAINING A WITNESS SIGNATURE FROM AN ADULT FAMILY MEMBER OR FRIEND RESIDING IN THE U.S.**

## CRIMINAL HISTORY INFORMATION / FINGERPRINT

### **DISCLOSURE**

This is to inform you that in processing your application an investigation will be made whereby information is obtained from State and local law enforcement agencies for any reportable criminal history information concerning you using your fingerprints. This information can include a record of any convictions, which are required by statute to be collected and maintained by government agencies.

### **RELEASE**

I agree to be fingerprinted by the City of Crystal Lake and acknowledge that these fingerprints will be used to investigate my criminal history and conviction record. I agree to and understand the release of the results of the investigation, to determine my criminal history information, will result in the disclosure of information concerning whatever criminal history exists regarding me to third parties.

I hereby acknowledge the results of the investigation to determine my criminal history will be released to authorized representatives of the City of Crystal Lake or I/O Solutions, Inc. for appropriate review and dissemination to those municipalities and/or Police/Fire departments (whichever is applicable) to which I have made application for employment or to which I will make application for employment.

By executing this form I release, discharge and hold harmless the City of Crystal Lake and I/O Solutions, Inc., its directors, officers, staff, employees, agents, representatives, and assignees from any and all claims, demands, actions, fees and causes of action, suits at law, proceedings in equity, and liability that may arise by reason of the investigation into my criminal history and the disclosure of any of that information.

Agreed to: \_\_\_\_\_  
Applicant Name, printed

Date \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Witness Name, printed

Date \_\_\_\_\_

\_\_\_\_\_  
Witness Signature

Date \_\_\_\_\_

**DO NOT SUBMIT WITHOUT OBTAINING A WITNESS SIGNATURE FROM AN ADULT FAMILY MEMBER OR FRIEND RESIDING IN THE U.S.**

## DRIVING RECORD

### **DISCLOSURE**

This is to inform you that in processing your application an investigation will be made whereby information is obtained from the Secretary of State regarding your driving record. This information can include a record of your current driver's license issuance information (exclusive of information on judicial driving permits); convictions and orders entered revoking, suspending, or canceling your driver's license or privilege.

### **RELEASE**

I hereby acknowledge the results of the investigation of my driving record will be released to authorized representatives of the City of Crystal Lake or I/O Solutions, Inc. for appropriate review and dissemination to those municipalities and/or Police/Fire departments (whichever is applicable) to which I have made application for employment or to which I will make application for employment.

By executing this form I release, discharge and hold harmless the City of Crystal Lake and I/O Solutions, Inc. its directors, officers, staff, employees, agents, representatives, and assignees from any and all claims, demands, actions, fees and causes of action, suits at law, proceedings in equity, and liability that may arise by reason of the investigation into and the disclosure of my driving record.

Agreed to:		Date _____
	Applicant Name, printed	
		Date _____
	Applicant Signature	
		Date _____
	Witness Name, printed	
		Date _____
	Witness Signature	

**DO NOT SUBMIT WITHOUT OBTAINING A WITNESS SIGNATURE FROM AN ADULT FAMILY MEMBER OR FRIEND RESIDING IN THE U.S.**

**EMPLOYMENT: PAST AND PRESENT**

**CONSENT**

I hereby consent to a thorough investigation of my past and present employment activities and agree to cooperate in such investigation. I hereby authorize my past and present employers to release the requested information and to comment on my work record.

**RELEASE**

I understand that by this written authorization my past and present employment records will be disclosed to third parties. I hereby consent to the release of the results of the investigation into my past and present employment and other relevant information to authorized representatives of the City of Crystal Lake and I/O Solutions, Inc. for appropriate review and dissemination to those municipalities and/or Police/Fire departments (whichever is applicable) to which I have made application for employment or to which I will make application for employment.

By executing this form I release, discharge and hold harmless the City of Crystal Lake and I/O Solutions, Inc., its directors, officers, staff, employees, agents, representatives, and assignees from any and all claims, demands, actions, fees and causes of action, suits at law, proceedings in equity, and liability that may arise by reason of the investigation of my past and present employment and the disclosure of the results of that investigation as authorized herein by me.

Agreed to: \_\_\_\_\_  
Applicant Name, printed

Date \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Witness Name, printed

Date \_\_\_\_\_

\_\_\_\_\_  
Witness Signature

Date \_\_\_\_\_

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**HIGH SCHOOL, COLLEGE, UNIVERSITY DIPLOMA**

**CONSENT**

I hereby consent to an investigation to determine the authenticity of my high school or General Education Diploma, college, or University diploma. I hereby authorize my secondary school or its equivalent to release such information regarding the authenticity of my high school (or its equivalent), college, or university diploma to representatives of the City of Crystal Lake or I/O Solutions, Inc.

**RELEASE**

I understand that by this written authorization that information gathered regarding the authenticity of my diploma or its equivalent will be disclosed to third parties.

I hereby consent to the release of results of the investigation of the authenticity of my diploma or its equivalent to authorized representatives of the City of Crystal Lake or to I/O Solutions, Inc. for appropriate review and dissemination to those municipalities and/or Police/Fire departments (whichever is applicable) to which I have made application for employment or to which I will make application for employment.

By executing this form I release, discharge and hold harmless the City of Crystal Lake and I/O Solutions, Inc., its directors, officers, staff, employees, agents, representatives, and assignees from any and all claims, demands, actions, fees and causes of action, suits at law, proceedings in equity, and liability that may arise by reason of the investigation of the authenticity of my high school (or its equivalent), college, or university diploma and the disclosure of the results of that investigation as authorized herein by me.

Agreed to: \_\_\_\_\_

Applicant Name, printed

Date \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Witness Name, printed

Date \_\_\_\_\_

\_\_\_\_\_  
Witness Signature

Date \_\_\_\_\_

**DO NOT SUBMIT WITHOUT OBTAINING A WITNESS SIGNATURE FROM AN ADULT FAMILY MEMBER OR FRIEND RESIDING IN THE U.S.**

## MEDICAL RECORDS

### CONSENT

I hereby consent for I/O Solutions, Inc., or its authorized representative to obtain my medical records from my primary physician for the period of time that my name appears on the City of Crystal Lake's Final Eligibility List.

### RELEASE

I understand that release of my medical records by this written authorization will result in disclosure of my medical records. I hereby consent to the release of my medical records to authorized representatives of the City of Crystal Lake or to I/O Solutions, Inc. for appropriate review and/or dissemination to those municipalities and/or Police/Fire departments to which I have made application for employment or to which I will make application for employment.

By executing this form I release, discharge and hold harmless the City of Crystal Lake and I/O Solutions, Inc., its directors, officers, staff, employees, agents, representatives, and assignees from any and all claims, demands, actions, fees and causes of action, suits at law, proceedings in equity, and liability that may arise by reason of the disclosure of my medical records as authorized herein by me.

Agreed to:		Date _____
	Applicant Name, printed	
		Date _____
	Applicant Signature	
		Date _____
	Witness Name, printed	
		Date _____
	Witness Signature	

**DO NOT SUBMIT WITHOUT OBTAINING A WITNESS SIGNATURE FROM AN ADULT FAMILY MEMBER OR FRIEND RESIDING IN THE U.S.**

## PERSONAL INFORMATION RELEASE TO MUNICIPALITY

### **DISCLOSURE**

This is to inform you that in processing your application an investigation has been made whereby information is obtained concerning you. This information can include a record of all personal information, required by statute to be collected and maintained by government agencies.

### **RELEASE**

I understand that release of the results of the historical investigation profile will result in the disclosure of information regarding me to third parties.

I hereby acknowledge the results of the investigation will be released to authorized representatives of the City of Crystal Lake or to I/O Solutions, Inc., for appropriate review and dissemination to this municipality and/or Police/Fire departments (whichever is applicable) to which I have made application for employment or to which I will make application for employment.

By executing this form I release, discharge and hold harmless the City of Crystal Lake and I/O Solutions, Inc., its directors, officers, staff, employees, agents, representatives, and assignees from any and all claims, demands, actions, fees and causes of action, suits at law, proceedings in equity, and liability that may arise by reason of the investigation and the disclosure of any of that information.

Agreed to:		Date _____
	Applicant Name, printed	
		Date _____
	Applicant Signature	
		Date _____
	Witness Name, printed	
		Date _____
	Witness Signature	

**DO NOT SUBMIT WITHOUT OBTAINING A WITNESS SIGNATURE FROM AN ADULT FAMILY MEMBER OR FRIEND RESIDING IN THE U.S.**

## WRITTEN EXAMINATION

### RELEASE

By this written authorization I understand that release of the results of my Written Examination will result in disclosure of those test results to third parties.

I hereby consent to the release of the results of my Written Examination for dissemination to the City of Crystal Lake and to those municipalities and/or Police/Fire departments (whichever is applicable) to which I have made application for employment or to which I will make application for employment.

By executing this form I release, discharge and hold harmless the City of Crystal Lake, Prairie Ridge High School and I/O Solutions, Inc., its directors, officers, staff, employees, agents, representatives, and assignees from any and all claims, demands, actions, fees and causes of action, suits at law, proceedings in equity, and liability that may arise by reason of the Fire Officer Examination or due to the disclosure of the test and survey results as authorized herein by me.

In the event that I have a disability which will affect my ability to take any examination, I will so inform the I/O Solutions, Inc. prior to the administration of the examinations so that a reasonable accommodation can be made. I/O Solutions, Inc. reserves the right to require medical documentation concerning the need for the accommodation.

Agreed to:		Date	
	Applicant Name, printed		
		Date	
	Applicant Signature		
		Date	
	Witness Name, printed		
		Date	
	Witness Signature		

**DO NOT SUBMIT WITHOUT OBTAINING A WITNESS SIGNATURE FROM AN ADULT FAMILY MEMBER OR FRIEND RESIDING IN THE U.S.**



**City of Crystal Lake**  
**Police and Fire Testing Process Questionnaire**

The City of Crystal Lake is an equal opportunity employer. The City maintains information regarding individuals who apply for employment to document selection ratios for various positions. This information will not accompany your application and will not be used in any way to decide whether you will be hired. This information is CONFIDENTIAL. Applicants are encouraged to complete this form; however, this is strictly VOLUNTARY and is not a condition of employment.

1. **Date:** \_\_\_\_\_
2. **Mr.**  \_\_\_\_\_  
**Mrs.**  \_\_\_\_\_  
**Ms.**  \_\_\_\_\_  

(Last Name) (First Name)
3. **Job applied for:**  Police Officer or  Firefighter Paramedic
4. **Birth Date:** \_\_\_\_\_
5. **Sex:**  Male  Female
6. The two questions below are designed to identify your ethnicity and race. Regardless of your answer to question 6a, please also answer question 6b.
  - a. **Are you Hispanic or Latino?** (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)  
 Yes  No
  - b. **Please select the racial category or categories with which you most closely identify by placing a check in the appropriate box. Check as many as apply.**
    - White:** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
    - Black or African American:** A person having origins in any of the black racial groups of Africa.
    - Native Hawaiian or Other Pacific Islander:** A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
    - Asian:** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
    - American Indian or Alaskan Native:** A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
7. **What is the highest level of education you have completed? Choose ONE answer.**
  - High School/GED  Master's Degree
  - Associate's Degree  PHD
  - Bachelor's Degree  Other: \_\_\_\_\_
8. **Are you a veteran?**  Yes  No
9. **How did you hear about the position?**
  - Flyer from City of Crystal Lake
  - Word of mouth
  - Walk-in
  - Cable TV
  - Internet – name of website: \_\_\_\_\_
  - Newspaper/Publication – name of newspaper/publication: \_\_\_\_\_
  - Other: \_\_\_\_\_

**KEEP THIS FORM**

**CHANGE OF INFORMATION FORM**

If your name appears on the final employment eligibility list for Firefighter/Paramedic, it is your responsibility to notify the City of Crystal Lake, in writing, if your name, address, telephone number, or job-related certifications change.

.....

I am currently on your eligibility list for Firefighter/Paramedic and need to amend the information originally presented in my application.

*Please provide the following information, as it appeared on your application:*

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Telephone Number Email Address

*Please provide the updated information:*

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Telephone Number Email Address

\_\_\_\_\_  
Signature

*Please send this form to:* City of Crystal Lake  
Attn: Human Resources  
100 West Woodstock Street  
Crystal Lake, Illinois 60014