

# Vernon College Fire Services

## Basic Firefighter Academy



**Starting:**

**March 10, 2025 (Begins with EMT-Basic)**  
Class meets Monday – Friday 8am – 5pm and some Saturdays (TBA)  
**Application Deadline: Thursday, February 27, 2025**

Office hours for application delivery:

Continuing Education Office – Century City  
4105 Maplewood Ave. Wichita Falls 76308

OR

Admissions Office  
4400 College Drive  
Vernon, TX 76384

Fall and Spring Hours

Monday-Thursday

8:00am–5:00pm

Friday 8:00am-12:00pm

4105 Maplewood Avenue ♦ Wichita Falls, TX 76308

Phone (940) 696-8752 ext. 3213

[www.vernoncollege.edu](http://www.vernoncollege.edu)

For specific questions or concerns after reviewing the Application Packet, please contact Coordinator of Fire Services, Rusty Downs, at (940) 631-3260. The Academy Application Packet must be completed and turned into the Continuing Education office for Rusty Downs to review prior to registration.

## Vernon College Basic Firefighter Academy Tuition Costs:

Basic Firefighter Academy Tuition: Fire Academy Portion = \$3,000

Included in tuition (liability insurance, program fees, online testing, state fire test)

Additional costs:

- A. **Uniform** - Uniforms may be purchased at The Uniform Shop on 10<sup>th</sup> and Brook, Wichita Falls. Approximate cost for uniforms will be \$325.00 and there will be a requirement of 3 sets needed.  
**\*\* Long sleeves are required if tattoos are visible.**
  
- B. **Textbooks - Essentials of Fire Fighting and Fire Department Operations 7<sup>th</sup> Edition**  
ISBN – 13-978-0-87939-657-2 \$92.00  
**Hazardous Materials for First Responders 5<sup>th</sup> Edition**  
ISBN – 978-087939613 \$60.00
  
- C. **Rental Gear for Fire from Gear Cleaning Solutions, LLC = \$600.00**
  
- D. **Physical Examination Cost**

**Potential out of pocket additional costs = \$1304.45**

**TUITION - Tuition must be paid in full at the time of registration upon acceptance.**

### APPLICATION INSTRUCTIONS

Please type or use ink only. Fill out the attached application completely and return it to Vernon College Continuing Education Office. It is the applicant's responsibility to ensure that all pertaining documents arrive with your application packet. All supporting documents are required with application submission for consideration/acceptance into Vernon College Basic Firefighter Academy.

### MINIMUM ADMISSION REQUIREMENTS

- Minimum Age of 18 Years/Must be a United States Citizen
- High School Graduate (or equivalent), or letter of expectation of graduation from High School Counselor
- Valid Driver's License (or ID)
- Physical examination documentation
- Must not be under indictment for any criminal or civil offense or have a felony conviction (the state of Texas will not certify persons with a criminal history)
- Must not have a DWI, DUID, or reckless driving convictions within the past ten years.
- Provide EMT-B certification if applicable.

### *Information for Your Reference*

Thank you for your interest in the Vernon College Basic Firefighter Academy. The purpose of the Basic Firefighter Academy is to serve the needs of the fire departments within Vernon College's service area. This program will help you in preparation for a career in the Fire

Service. The Vernon College Firefighter Academy is approved by the Texas Commission on Fire Protection.

Please read the information provided to you in the following pages and follow the instructions carefully when filling out your application. ***Incomplete application packets, or failure to comply with these procedures, may preclude your acceptance into the Academy.***

Vernon College does not discriminate on the basis of race, color, religion/creed, age, gender, disabling conditions, handicaps, or national origin.

The program to which you are applying is both mentally and physically challenging. Because of the unique environment in which firefighting personnel function, it is important to have a good understanding of the demands of the profession. A copy of the Functional Position Description is attached. Please review it carefully to assess your ability to perform the essential job functions of the profession. If you believe you have a disability that will require accommodations during the application process or during your enrollment as a student, please contact the PASS Department. While we will assure that everyone is afforded equal opportunity during the application and instructional processes, you should be aware that you must be able to successfully complete all of the program's requirements, either with or without reasonable accommodations.

### **DISABILITY ACCOMMODATIONS**

Vernon College will take the steps required for reasonable accommodation to ensure that no individual is excluded, denied service, segregated, or otherwise treated differently than other individuals because of the absence of auxiliary aids and services. Support assistance may include note takers, interpreters for the deaf, tutoring, counseling and advising, special arrangements, tape recorders, etc. Persons requesting disability services should complete a request for services by contacting the Proactive Assistance for Student Success (PASS) department. In many cases, recent documentation of disability may be required.

### **COURSE DESCRIPTION**

The Vernon College Basic Firefighter Academy is a fast-paced, intense and highly disciplined program. Seven courses are part of this program, Firefighter Certification I, II, III, IV, V, VI, and VII which satisfy the Texas Commission on Fire Protection (TCFP) curriculum for Basic Structural Fire Suppression, Course #100.

Vernon College Basic Firefighter Academy is a highly interactive and engaging firefighter training course that provides flexibility to the students that are not able to attend traditional courses. The Vernon College Firefighter Academy meets the curriculum requirements of the Texas Commission on Fire Protection (TCFP) for certification as a basic firefighter. This course provides manipulative and technical training in basic concepts of fire department organization, ropes, knots and hitches, hose and hose handling, ladder evolutions, wildland fires, fire investigation, fire prevention, salvage operations, fire department apparatus, tools and equipment, breathing apparatus, extinguishers, personal protective equipment, communications, swift water rescue, and hazardous materials.

## **CONDUCT**

The Academy is conducted in a paramilitary format. Candidates are expected to adhere to strict rules of conduct. Appearance and grooming standards are enforced. All questions regarding Academy operations and expectations will be answered during the interview process.

## **ACCEPTANCE**

All applicants will be notified regarding their standing in the Academy. Successful candidates will be given instructions regarding the next phase of the application process.

**Application Deadline: Thursday, February 27, 2025**

All applications received after this date will NOT be considered

### **Mail Application Packet To:**

**Vernon College Continuing Education  
Attn: Rusty Downs, Coordinator of Fire Services  
4105 Maplewood Avenue  
Wichita Falls, TX 76308**

### **Deliver Application Packet To:**

**Continuing Education Office  
4105 Maplewood Ave.  
Century City Center  
Wichita Falls, TX 76308**

**OR**

**Continuing Education Office  
4400 College Drive  
Vernon, TX 76384**

**Fall and Spring Hours  
Monday-Thursday 8:00am -5:00pm  
Friday 8:00am-12:00pm**

# Vernon College Basic Firefighter Academy

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## STUDENT CHECKLIST

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

Email \_\_\_\_\_ Phone: \_\_\_\_\_

I am submitting a complete application packet for the next available class. I used the checklist to double check my packet and have signed all necessary forms. **Submit in a 9 x 12 envelope.**

**Reminder:** CLEAR COPIES of documentation only. Do not submit original documents

\_\_\_ Firefighter Academy Application.

\_\_\_ BFA Hold Harmless Agreement Statement of Student's Responsibility Form.

\_\_\_ Release of Liability agreement.

\_\_\_ Statement of Student's Responsibility Form.

\_\_\_ Physical examination.

\_\_\_ Copy of high school Diploma or GED.

\_\_\_ Copy of Accuplacer scores (or TSI if applicable).

\_\_\_ Copy of a valid non-expired U.S or State Govt. issued Identification (Driver's License).

\_\_\_ Successful EMT-B testing completed if applicable.

For Office Use Only:

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

## BASIC FIREFIGHTER ACADEMY APPLICATION

**Instructions:** Please print in ink or type. Answer all questions accurately and completely. All statements in your application are subject to verification; incorrect or incomplete statements may bar or remove you from enrollment. Resumes will not be accepted in place of a completed application.

### 1. Personal Data

Name (Last, First Middle)	Area Code (    )	Home Telephone Number
Mailing Address (Number & Street)	Area Code (    )	Cellular Phone
City, State, Zip	Area Code (    )	Work Phone
Date of Birth	Email Address	

### 2. Education

High School Graduate: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> GED	Location of High School
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Schools Attended other than High Schools	Location	Course of Study	Units Earned	Degree or Certificate	Points	Total Points

Please describe additional course work or training (including military), which may assist you in the fire service field.

Please list special certificates or other competencies which may assist you in the fire service field.

#### Licensing Information

EMT Certification: Type: \_\_\_\_\_ Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Driver's License: Type: \_\_\_\_\_ Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

### 3. Physical Conditions or Limitations

Do you have any physical limitations that would prevent you from performing tasks involved in the Firefighter Academy?  
 No     Yes    If yes, please explain:

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### 4. Conviction Record

Have you ever been convicted of a criminal offense, which resulted in you being imprisoned or placed on probation?  
 No     Yes    If yes, please explain:

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### 5. Work Experience

You should respond completely to the information in this section. LIST YOUR MOST RECENT EMPLOYMENT **FIRST**. Describe different positions held with the same employer in different blocks. List all experience, paid and voluntary. Additional sheets should be attached to this application when necessary to fully describe related experience, training, education. DO NOT ENTER "SEE RESUME".

From: _____ To: _____ Month/Year    Month/Year	Title of Position:
Name & Address of Employer:	Duties/Responsibilities:
Name & Title of Your Supervisor:	
Reason for Leaving:	Number Supervised (if applicable):
From: _____ To: _____ Month/Year    Month/Year	Title of Position:
Name & Address of Employer:	Duties/Responsibilities:
Name & Title of Your Supervisor:	
Reason for Leaving:	Number Supervised (if applicable):
From: _____ To: _____ Month/Year    Month/Year	Title of Position:
Name & Address of Employer:	Duties/Responsibilities:
Name & Title of Your Supervisor:	
Reason for Leaving:	Number Supervised (if applicable):

From: _____ To: _____ Month/Year Month/Year	Title of Position:
Name & Address of Employer:	Duties/Responsibilities:
Name & Title of Your Supervisor:	
Reason for Leaving:	Number Supervised (if applicable):
From: _____ To: _____ Month/Year Month/Year	Title of Position:
Name & Address of Employer:	Duties/Responsibilities:
Name & Title of Your Supervisor:	
Reason for Leaving:	Number Supervised (if applicable):
From: _____ To: _____ Month/Year Month/Year	Title of Position:
Name & Address of Employer:	Duties/Responsibilities:
Name & Title of Your Supervisor:	
Reason for Leaving:	Number Supervised (if applicable):

6. Are you comfortable speaking in front of small or large groups? Yes \_\_\_\_\_ No \_\_\_\_\_
7. Do you believe working in the prehospital care environment may affect you in any manor? Yes \_\_\_\_\_ No \_\_\_\_\_

If necessary please explain -

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### Certification of Applicant

I certify that the foregoing information and answers are true, complete, and correct. I understand that any misrepresentation or omission of facts is cause for rejection of application and removal from the eligibility list for enrollment in the Vernon College Basic Firefighter Academy. I hereby authorize the Vernon College Coordinator of Fire Services to investigate all statements contained in this application.

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

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



**Vernon College Fire Academy  
Basic Firefighter Academy (BFA) Hold Harmless Agreement**

I \_\_\_\_\_ wish to attend the Vernon College Basic Firefighter Academy. I understand that the training consists of physical conditioning activities and hands on skills testing, as it relates to the fire service.

The skills related to firefighting activities will include **heavy lifting, climbing and other arduous activities while on the ground, on ladders, in stairways, on roofs and other elevated locations.** I understand that I will also have to **perform in confined spaces and in areas of limited or zero visibility.** I understand that I will be required to wear fire-fighting protective clothing including coat, pants, boots, helmet and a 35-pound self-contained breathing apparatus. I understand that I will also **engage in actual firefighting, in extreme IDLH (Immediately Dangerous to Life and Health) environments.**

I understand the inherent dangers of fire service activities and the training involved in the Basic Firefighter Academy. I understand that while not obligated by Vernon College, personal medical insurance is strongly recommended to cover any injuries that may occur as a result of my participation in the Basic Firefighter Academy. I agree not to hold Vernon College, Wichita Falls Fire Department, City of Wichita Falls, or its Staff liable for any injuries that may occur during the course of instruction. I am exercising my own free choice to participate voluntarily in the (Basic Firefighter Training Academy), and I promise to take due care during such participation. I have been informed of the nature of these activities, and I am aware of the hazards and risks that may be associated with my participation in these activities, including the risks of bodily injury, death or damage to property from known or unknown causes.

**I HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE VERNON COLLEGE, WICHITA FALLS FIRE DEPARTMENT, CITY OF WICHITA FALLS, ITS TRUSTEES, OFFICERS, EMPLOYEES, AGENTS OR VOLUNTEERS, AND IF APPLICABLE, OWNERS AND LESSORS OF PREMISES ON WHICH THE ACTIVITY TAKES PLACE FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED BY OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES." I FURTHER AGREE, THAT IF, DESPITE THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, OR ANYONE ON MY BEHALF, MAKES A CLAIM AGAINST ANY OF THE RELEASEES, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ARBITRATION EXPENSES, MEDICAL EXPENSES, ATTORNEY FEES, LOSS, LIABILITY, DAMAGE OR COST WHICH MAY BE INCURRED AS THE RESULT OF SUCH CLAIM. I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.**

In signing below I hereby assert that:

- I have read and understand the content of this document
- I understand that Vernon College strongly recommends personal medical insurance coverage for ALL applicants participating in the Basic Firefighter Academy.
- I am personally liable for injuries that I may suffer as a result of participation in the Vernon College Basic Firefighter Academy.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

## **Wichita Falls Fire Department Release of Liability Agreement**

By participating in any training program (regardless of the sponsorship of such program), that involves the use of any of the facilities of the Wichita Falls Training Center (herein, "Facilities"), the undersigned participant expressly agrees the Wichita Falls Fire Department, City of Wichita Falls, shall not be liable for any damages arising from personal injuries sustained by the party in, on or about the premises of the Facilities or as a result of using the Facilities and/or the equipment thereon.

By the execution of this Agreement, the undersigned participant acknowledges and assumes full risk and responsibility for any personal injuries, damages, or losses which may occur to such participant on or about the premises of the Facilities, regardless of participation in any program, and does hereby fully release and discharge the Wichita Falls Fire Department, City of Wichita Falls (including its officers, employees and agents) from any and all claims, demands, rights of action or causes of action, present or future, known or unknown, resulting from arising out of the undersigned's use of the Facilities or the equipment thereon.

The undersigned further acknowledges and agrees that the Wichita Falls Fire Department, City of Wichita Falls (including its officers, employees, and agents) shall not be liable for any damage, loss or theft of any party's personal property occurring while the undersigned is present at the Facilities.

The undersigned also acknowledges and agrees that the Wichita Falls Fire Department, City of Wichita Falls, acting by and through its Training Center employees, reserves the right to call emergency medical aid for an injured party and said party accepts responsibility for any financial obligations arising from such emergency medical aid or transportation to a medical facility, through health insurance or otherwise.

Party agrees to keep and obey all rules and regulations of the Wichita Falls Public Safety Training Center for the use of facilities and the equipment and facilities therein.

This Agreement shall be interpreted in accordance with the statutes of the state of Texas, and if any particular provision in this contract shall be deemed invalid, the same shall not affect the balance of this contract and the remaining provisions thereof.

This release and agreement shall be binding upon me, any of my heirs, executors, administrators, personal representatives and assigns, and shall inure to the benefit of the said Fire Department and City of Wichita Falls, officers, and members herein designated, and their heirs, executors, administrators, personal representatives, assigns and successors in office.

Dated this: \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

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

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

City, State, Zip: \_\_\_\_\_

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

## Statement of Student's Responsibility

Review and initial each section as verification that you have read and understand this information:

\_\_\_\_\_ I acknowledge that this information packet contains policies, regulations, and procedures in existence at the time this publication went to press. I also acknowledge that Vernon College reserves the right to make changes at any time to reflect current Board policies, administrative regulations and procedures, and applicable State and Federal regulations. Furthermore, I understand that this packet is for information purposes only and does not constitute a contract, expressed or implied, between any applicant, student or faculty member and Vernon College.

\_\_\_\_\_ I accept full responsibility for submitting a complete application packet and understand incomplete materials including missing or incomplete forms, immunizations records, and CPR certification will disqualify my application. I also accept the responsibility of informing the Coordinator of Fire Services of any change in my status, address, telephone number, or other information that would affect my application status.

\_\_\_\_\_ I understand that if accepted to Vernon College Firefighter Academy, all forms, immunization records, etc. submitted with my packet becomes the property of Vernon College and will not be returned nor photocopied for me. Therefore, I am responsible for keeping my own photocopies of these documents before I submit them with program application packet materials. I also authorize the release of these records to any of my clinical sites which may require them.

\_\_\_\_\_ I acknowledge that if admitted to Vernon College Firefighter Academy, I may be assigned to clinical rotations at area healthcare facilities which may require additional proof of immunity or additional inoculations/immunizations. I also acknowledge that I am required to have health care coverage through the duration of my courses.

\_\_\_\_\_ I acknowledge that a criminal background check and mandatory drug screening are required before I am allowed to attend clinical. I understand that the results of these screenings become the property of Vernon College Firefighter Academy and will not be released to me or any other third party. I also understand that the outcome of these screenings may result in my dismissal from Vernon College Firefighter Academy.

\_\_\_\_\_ I acknowledge that I must comply with class and clinical requirements, if I am absent from clinical for physical or mental illness, surgery or pregnancy reasons, I must present a written release from a physician before being allowed to return to the clinical setting.

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Applicant's

Signature

Date

## Medical/Physical Exam: Vernon College Firefighter Academy

Vernon College Basic Firefighter Academy requires proof of a physical examination by a licensed physician/health care provider to consideration as a potential candidate.

### Student's Name

Last	M/I	First	Sex	DOB : (DD/MM/YYYY) / /
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### Please Complete All Blanks

<b>Legend: N= normal X= abnormal NE = Not Examined</b>				
Weight	Height	Pulse	Respirations	Blood Pressure S _____ D _____

General Body Build		Skin	Abnormal Masses	Eyes	Ears	Nose	Throat
Teeth	Neck	Lungs	Cardiac	Chest	Liver	Spleen	Spine

### Joint Function

Neck	Shoulders	Elbows	Wrists	Hands	Hips/Back	Knees	Ankles	Feet
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### Please Describe Abnormal Findings

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### Medical History *(Please check all that apply)*

#### Diseases:

- |   |  |                                       |  |
|---|--|---------------------------------------|--|
| <input type="checkbox"/> Asthma         | <input type="checkbox"/> Heart Disease | <input type="checkbox"/> Tuberculosis | <input type="checkbox"/> Measles             |
| <input type="checkbox"/> Diabetes       | <input type="checkbox"/> Seizures      | <input type="checkbox"/> Emphysema    | <input type="checkbox"/> Hypoglycemic        |
| <input type="checkbox"/> Hepatitis      | <input type="checkbox"/> Rheumatism    | <input type="checkbox"/> Small Pox    | <input type="checkbox"/> Tuberculosis        |
| <input type="checkbox"/> Diphtheria     | <input type="checkbox"/> Influenza     | <input type="checkbox"/> Pneumonia    | <input type="checkbox"/> Infantile Paralysis |
| <input type="checkbox"/> Osteoarthritis | <input type="checkbox"/> Mumps         |                                       |  |

Other (Please describe)

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**Surgery:**

Shoulder  Arm  Back  Knee  Ankle

Other (*Please describe*)

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**List Current Medications**

1.
2.
3.
4.

**Allergies (Meds / Food)**

1.
2.
3.
4.

Able to lift up to 50lbs without assistance/ up to 125lbs with assistance?

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

Are there any concerns regarding working in areas that have limited visibility, high noise conditions or extreme hot, cold or wet environment?

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

**Note To Physician/Health Care Provider:**

While not an exclusive list, the following examples are meant to illustrate some of the extreme physical demands and working conditions inherent in firefighter training.

**Physical Demands:**

Characterized by strength, endurance, coordination, agility, dexterity

- Pick up and advance charged fire hoses
- Force entry with axe/battering ram
- Climb stairs with equipment weighing approximately 50 lbs.
- Vent roofs, breach walls, overhaul burned buildings with power/hand tools
- Lift and climb/descend ladders (with victims up to 200 lbs.)
- Operate power tools and extrication equipment
- Stoop, crawl, crouch, and kneel in confined spaces
- Reach, twist, balance, grapple, bend and lift under emergency conditions

- Run, dodge, jump and maneuver with equipment
- All of the above are performed wearing protective clothing/gear, approximately 65 lbs.

**Working Conditions:**

Characterized by adverse working conditions

- Work in extreme temperatures; day and night; in rain, snow and ice
- Exposure to smoke, gases, dust and poor ventilation
- Work in closely confined spaces
- Intense exposure to water and/or steam
- Exposure to a wide range of highly emotional and traumatic events.
- Exposure to noise and vibration from tools, equipment, machinery, etc.
- Work at height (e.g., on ladders, roof tops, etc)
- Work within restrictions of personal protective clothing, approximately 65 lbs., or hazardous materials encapsulated protective clothing

***I certify that I have examined this individual and he/she is physically able to enter Basic Firefighter Academy training activities.***

YES       NO (If no, please explain below)

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<b><u>Date of Examination:</u></b>	<b><u>Printed/Typed Name of Physician:</u></b>
<b><u>Physicians Address:</u></b>	<b><u>Signature of Physician:</u></b>

## JOB REQUIREMENTS (KEEP FOR YOUR INFORMATION)

The purpose of this position is to provide fire protection, rescue and emergency services in order to protect life and property. This is accomplished by answering calls, providing emergency medical services, hazardous materials responses, completing firefighting and rescue activities, investigating scenes, providing public education, and inspecting and testing plans and equipment. Additional duties include maintaining the fire station, conducting tours, inspecting equipment, inspecting building and completing related duties as assigned.

<b>Essential Function</b>	Provides emergency medical services by answering calls and responding to requests for service, extricating victims from accident scenes, lifting patients, checking and verifying vital signs, and providing life support.
<b>Code</b>	
<b>Essential Function</b>	Inspects plans, buildings, and equipment to ensure the safety of citizens in buildings and structures by reviewing codes, testing equipment and walking building sites.
<b>Code</b>	Medium
<b>Essential Function</b>	Completes hydrant inspections by applying flow and pressure tests, greasing moving parts, removing debris and obstacles surrounding hydrants, and ensuring hydrants are in good working order.
<b>Code</b>	Medium
<b>Essential Function</b>	Educates the public by providing instruction on fire prevention, overseeing fire drills, inspecting alarms and sprinklers, conducting fire station tours, and answering general questions.
<b>Code</b>	Light
<b>Essential Function</b>	Maintains the fire station by cleaning the facility; maintaining the grounds, performing preventive maintenance and repairs on the facility and the fire engines; cleaning, inspecting and replacing hoses, equipment and apparatus, and maintaining protective equipment.
<b>Code</b>	Medium
<b>Essential Function</b>	Completes fire suppression activities by ventilating structures, searching for hidden fires, providing sufficient water supplies, pumping engines, controlling hoses, climbing ladders, searching for victims, and eliminating the possibility of rekindling.
<b>Code</b>	Very Heavy
<b>Job Requirements</b>	
<b>Formal Education</b>	Work requires knowledge necessary to understand basic operational, technical, or office processes. Level of knowledge equivalent to four years

	of high school or equivalency.
<b>Experience</b>	Over two years up to and including four years
<b>Supervision</b>	Job has no responsibility for the direction or supervision of others.
<b>Human Collaboration Skills</b>	Work may require providing advice to others outside direct reporting relationships on specific problems or general policies. Contacts may require the consideration of different points of view to reach agreement. Elements of persuasion may be necessary to gain cooperation and acceptance of ideas.
<b>Freedom to Act</b>	Receives Direction: The employee normally performs the duty assignment after receiving general instructions as to methods, procedures, and desired end results. There is some opportunity for discretion when making selections among a few, easily identifiable choices. The assignment is usually reviewed upon completion.
<b>Technical Skills</b>	Skilled: Work requires a comprehensive, practical knowledge of a technical field with use of analytical judgment and decision-making abilities appropriate to the work environment of the organization.
<b>Budget Responsibility</b>	This position has no budget responsibility.
<b>Reading</b>	Intermediate – Ability to read papers, periodicals, journals, manuals, dictionaries, thesauruses, and encyclopedias. Ordinarily, such education is obtained in high school up to college. However, it may be obtained from experience and self-study.
<b>Math</b>	Intermediate – Ability to deal with system of real numbers; practical application of fractions, percentages, ratios/proportions and measurement. Ordinarily, such education is obtained in high school up to college. However, it may be obtained from experience and self-study.
<b>Writing</b>	Intermediate – Ability to write reports, prepare business letters, expositions, and summaries with proper format, punctuation, spelling, and grammar, using all parts of speech. Ordinarily, such education is obtained in high school up to college. However, it may be obtained from experience and self-study.
<b>Certification &amp; Other Requirements</b>	Texas Commission on Fire Protection Basic Firefighter Certification and Advance Emergency Medical Technician with the Texas Department of State Health Services. Texas Commission on Fire Protection Courage to be Safe and Texas Commission on Fire Protection Traffic Incident course. Incident Command Systems 100, 200, 700, 800. National Wildfire Coordinating Group Wildland Firefighter 1. Individuals must also meet all requirements per Texas State Statute, Chapter 143, Local and State Civil Service Rules.
<b>Driver's License</b>	Yes



<b>Type of License</b>	B
<b>Endorsements</b>	
<b>FLSA Job Family</b>	33-2011.01 – Municipal Firefighters

Physical Demands

Overall Physical Strength Demands

**(S) Sedentary:** Exerting up to 10 lbs. occasionally or negligible weights frequently; sitting most of the time.

**(L) Light:** Exerting up to 20 lbs. occasionally; 10 lbs. frequently; or negligible amounts constantly; OR requires walking or standing to a significant degree.

**(M) Medium:** Exerting 20-50 lbs. occasionally; 10-25 lbs. frequently; or up to 10 lbs. constantly.

**(H) Heavy:** Exerting 50-100 lbs. occasionally; 10-25 lbs. frequently; or up to 10-20 lbs. constantly.

**(V) Very Heavy:** Exerting over 100 lbs. occasionally; 50-100 lbs. frequently; or up to 20-50 lbs. constantly.

<b>Physical strength for this position</b>	H
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Physical Demands

**(C) Continuously:** 2/3 or more of the time.

**(F) Frequently:** From 1/3 to 2/3 of the time.

**(O) Occasionally:** Up to 1/3 of the time.

**(R) Rarely:** Less than 1 hour per week.

**(N) Never:** Never occurs.

Note: This is intended as a description of the way the job is currently performed. It does not address the potential for accommodation.

<b>Standing</b>	Communicating with co-workers, Observing work duties, Observing work site, Making presentations
<b>Standing Frequency</b>	F
<b>Fine Dexterity</b>	Telephone keypad, Computer keyboard, Calibrating equipment
<b>Fine Dexterity Frequency</b>	O
<b>Walking</b>	To other departments/offices/office equipment, Around work site
<b>Walking Frequency</b>	F
<b>Lifting</b>	Supplies, Equipment, Files
<b>Lifting Frequency</b>	F
<b>Carrying</b>	Supplies, Equipment, Files
<b>Carrying Frequency</b>	F
<b>Sitting</b>	Desk Work, Meetings, Driving

<b>Sitting Frequency</b>	O
<b>Reaching</b>	For supplies and files
<b>Reaching Frequency</b>	O
<b>Handling</b>	Paperwork
<b>Handling Frequency</b>	F
<b>Kneeling</b>	Filing in lower drawers, Retrieving items from lower shelves/ground
<b>Kneeling Frequency</b>	F
<b>Crawling</b>	None
<b>Crawling Frequency</b>	O
<b>Pushing/Pulling</b>	File drawers, Tables and chairs, Equipment, Hose
<b>Pushing/Pulling Frequency</b>	F
<b>Climbing</b>	Stairs, Ladder, Step stool, Onto Equipment
<b>Climbing Frequency</b>	O
<b>Vision</b>	Reading, Computer Screen, Observing work site, Driving
<b>Vision Frequency</b>	C
<b>Foot Controls</b>	Driving, Operating heavy equipment
<b>Foot Controls Frequency</b>	F
<b>Balancing</b>	On Ladder, on step stool, on equipment
<b>Balancing Frequency</b>	O
<b>Bending</b>	Filing in lower drawers, Retrieving items from lower shelves/ground, Making repairs
<b>Bending Frequency</b>	F
<b>Crouching</b>	Filing in lower drawers, Retrieving items from lower shelves/ground
<b>Crouching Frequency</b>	O
<b>Hearing</b>	Communicating via telephone/radio, to co-workers/public, listening to

	equipment
<b>Hearing Frequency</b>	F
<b>Twisting</b>	From computer to telephone, Getting inside vehicle
<b>Twisting Frequency</b>	F
<b>Talking</b>	Communicating via telephone/radio, to co-workers/public
<b>Talking Frequency</b>	F
<b>Other (specified if applicable):</b>	None
<b>Other Frequency</b>	N

Additional Information

Machines, Tools, Equipment, Software, and Hardware

<b>Machines, Tools, Equipment, Software, and Hardware: Computers, printers and related software, copier, fax machine, check signing equipment.</b>	Computers, printers and related software, copier, fax machine, firefighting and rescue equipment
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Environmental Factors

- (D) Daily
- (W) Several Times Per Week
- (M) Several Times Per Month
- (S) Seasonally
- (N) Never

<b>Extreme Temperatures</b>	W
<b>Wetness/Humidity</b>	W
<b>Respiratory Hazards</b>	W
<b>Noise and Vibration</b>	W
<b>Physical Hazards</b>	W

Health and Safety Factors

- (C) Continuously
- (F) Frequently
- (O) Occasionally
- (R) Rarely
- (N) Never

<b>Mechanical Hazards</b>	F
<b>Chemical Hazards</b>	F
<b>Electrical Hazards</b>	F
<b>Fire Hazards</b>	F
<b>Explosives</b>	F
<b>Communicable Diseases</b>	F
<b>Physical Danger or Abuse</b>	F
<b>Other (see below)</b>	
<b>Other Health and Safety Factor</b>	N/A
<b>Protective Equipment Required</b>	Fire protection equipment and clothing

Non-Physical Demands

**Description of Non-Physical Demands**

(F) Frequently: From 1/3 to 2/3 of the time.

(O) Occasionally: Up to 1/3 of the time.

(R) Rarely: Less than 1 hour per week.

(N) Never: Never occurs.

<b>Time Pressure</b>	F
<b>Frequent Change of Tasks</b>	O
<b>Performing Multiple Tasks Simultaneously</b>	O
<b>Tedious or Exacting Work</b>	R
<b>Noisy/Distracting Environment</b>	F
<b>Emergency Situation</b>	F
<b>Irregular Work Schedule/Overtime</b>	F
<b>Working Closely with</b>	F

<b>Others as Part of a Team</b>	
<b>Other (see below)</b>	N
<b>Other Non-Physical Demand</b>	N/A

Work Location

<b>Primary Work Location</b>	Other (see below)
<b>Secondary Work Location</b>	N/A