



**Dutton Dunwich Fire Department  
Municipality of Dutton Dunwich  
199 Currie Road  
Dutton Ontario  
N0L 1J0**

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Being a firefighter is an excellent way to serve your community, but it is by no means an easy commitment. You will have to get up in the middle of the night. You will have to get out in sub-zero weather or in a severe storm. You may be engaged in activities that result from an accident that may be harmful or fatal to someone.

In volunteering to join an organization like Dutton Dunwich Fire Department you have many obligations.

We want you to become proficient in all aspects of firefighting, have a valid First-Aid and CPR Certificate, be qualified as a driver with a DZ license (within 1 year) and get a medical examination to prove that you are physically capable of carry out the demanding tasks.

We hope that the following pages do not deter you. In the event that you are accepted, we look forward to a good relationship as firefighter to firefighter.

Yours truly

Yours truly,

Jeff McArthur  
Fire Chief



Municipality of  
**Dutton Dunwich**

**ON CALL FIREFIGHTER - APPLICATION FORM**

PLEASE PRINT:

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_

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

**GENERAL INFORMATION**

How long have you lived at the address indicated on the Application?  
\_\_\_\_\_

Please list any physical activities you regularly participate in to keep yourself in good physical condition:  
\_\_\_\_\_  
\_\_\_\_\_

Have you been involved in other community work? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, please specify:  
\_\_\_\_\_  
\_\_\_\_\_

List any other interests and hobbies:  
\_\_\_\_\_

Do you have any phobias (heights, confined spaces etc.,) that may prohibit you from performing the duties of a firefighter?  
\_\_\_\_\_

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

If yes, please specify:  
\_\_\_\_\_

Do you speak or write a second language? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, please specify:  
\_\_\_\_\_

**EDUCATION AND TRAINING**

Secondary/Highschool Name and Location:

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Last Grade Completed: \_\_\_\_\_ Did You Graduate? Yes: \_\_\_\_\_ No: \_\_\_\_\_

**Post-Secondary Education:**

Name of College/University:

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Courses Taken:

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Year of Graduation?

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Other Certificates, Licenses, Apprenticeships, Programs or Related Courses:

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**RELATED SKILLS**

Driver's License Number, Province and Class:

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Experience Operating Trucks, Heavy or Light Equipment:

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Other Operating Equipment Skills:

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First Aid Certification: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Level/Class: \_\_\_\_\_

**CURRENT EMPLOYER**

Company Name:

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Company Address:

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Occupation:

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Years of Services:

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Supervisor/Manager Name:

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Phone #:

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Duties:

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Do Your Work Shift Work? Yes: No: \_\_\_\_\_

Hours of Work: \_\_\_\_\_

Would your employer allow you to respond to an emergency call during working hours?

Always: Sometimes: Rarely: Never: \_\_\_\_\_

Who can we contact to verify this?

Name: Phone #: \_\_\_\_\_

Do you have your own vehicle for transportation: Yes: No: \_\_\_\_\_

Describe your experience/skills as they relate to the fire service:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How would you be an asset to the Dutton Fire Department?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Submit to:

Anya Kisiel  
Fire Services Coordinator  
199 Currie Road, Dutton, Ontario  
N0L 1J0  
[fireadmin@duttondunwich.on.ca](mailto:fireadmin@duttondunwich.on.ca)



**Please Read Carefully Before Signing**

I, the undersigned, apply to enroll as an on-call fire fighter with the Municipality of Dutton Dunwich Fire Department, and if accepted will undertake to perform such duties as outlined in may be assigned to me by the Fire Chief, or his/her delegate.

I hereby certify:

That the information given on the application documents is true and I understand that any untrue statements will disentitle me for hire and will be cause for dismissal.

I understand:

- That there will be a probationary work period during which my performance and suitability for the position will be reviewed.
- As a condition of recruitment, I will be required to pass a medical exam before my confirmation.
- That I will provide a current Criminal Record Check with Vulnerable Persons Sector
- That I will provide annually a current Driver's Abstract.
- I will review all policies, procedures and training as required by the province of Ontario.

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Applicants Signature

Date

Thank you for completing this application and for your interest in the Municipality of Dutton Dunwich Fire Department.



Municipality of  
**Dutton Dunwich**

**MEDICAL EXAMINATION CONFIRMATION FORM**

Please return to:

Anya Kisiel  
Fire Services Coordinator  
199 Currie Road,  
Dutton, Ontario  
N0L 1J0  
[fireadmin@duttondunwich.on.ca](mailto:fireadmin@duttondunwich.on.ca)

Attention: Fire Chief Jeff McArthur

I, Dr. \_\_\_\_\_ have examined \_\_\_\_\_ on  
\_\_\_\_\_ (date) and have concluded that the above  
mentioned person is physically fit to perform the duties of a Firefighter.

\_\_\_\_\_  
Signature