



Chichester Fire-Rescue Department

22 Main St, Chichester NH 03258
Phone (603)798-5954 Fax (603)798-5909
Cell (603)344-2959
Fire Chief Alan S Quimby
aquimby@chichesternh.org



Per Diem Firefighter / EMT - Town of Chichester

The Chichester Fire Rescue Department is accepting applications for the position of Per Diem Firefighter/EMT. These positions cover 12 hour shifts from 0600-1800, seven days a week. These are non-benefited/non-salaried positions. This is skilled emergency medical and firefighting work consisting of combating, extinguishing and preventing fires and providing emergency medical services.

Duties: Include responding to a wide range of fire suppression and medical emergencies in a community encompassing 21.2 square miles, and a year round population of approximately 2500. The department's annual call volume is approximately 500 calls for service per year. Work involves protecting life and property through performing emergency medical services, firefighting and rescue tasks. Work is generally performed as a member of a team. Employees in this class participate in the performance of potentially hazardous tasks under emergency conditions which may require strenuous exertion. Although firefighting, rescue and emergency medical services work are the most difficult areas of the position, a significant portion of the time is spent training, studying methods and techniques required to perform the functions of the job, performing routine station maintenance, equipment maintenance, community outreach assignments and various department duties. Specific orders and assignments are given by a superior officer, both on the emergency scene and at the fire station. Work performance requires initiative and a thorough understanding of fire suppression and emergency medical service methods as learned on the job and in training. The candidate must be prepared to respond to Fire and EMS calls in all types of weather. Due to the geography of the community the candidate must be prepared for emergencies on/in the water, on thin ice, on highways, in residential neighborhoods, commercial areas as well as agricultural and wildland settings.

Position requirements: Must be available for a minimum of 24 hours per month of scheduled on-duty time. Must be a minimum of 18 years of age. Must have a high school diploma, GED, or currently be enrolled in a secondary education program. Must hold and maintain a valid New Hampshire driver's license. *Must be insurable under the Town's vehicle insurance policy.* Must hold and maintain certification as an EMT, AEMT, or Paramedic, (Paramedic certification preferred). Must hold and maintain a valid New Hampshire EMS provider's license with a minimum of 1 year active field experience. Must hold and maintain a valid CPR card. (Preference will be given to applicants holding an NFPA 1001 Firefighter I certificate or greater). Must show proof of a comprehensive physical exam as outlined by departmental standards. The person(s) filling these positions must be mature, honest, compassionate, able to work well with others, willing and able to interact positively with fellow employees and the public. Candidates not currently meeting the above requirements are still encouraged to apply for future consideration.

Applications: will be accepted until such time as an acceptable number of employees are hired to fill needed shifts. Applications can be obtained at the fire station or town office. Completed applications may be dropped off or mailed to Town of Chichester Fire Rescue Department 22 Main St, Chichester NH 03258.

Pay commensurate with applicants experience not to exceed \$19.00 per hour.

For additional information call the fire station at 603-798-5954 or email aquimby@chichesternh.org

The town of Chichester is an Equal Opportunity Employer

"Smoke and Carbon Monoxide Detectors Save Lives"



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Application

Name _____
Last First MI

Mailing Address: _____
(No.) (Street/road)

City/Town State/ZIP

Are you over the age of eighteen? Yes - No (Please circle one)

Are you authorized to accept work in the US? Yes - No (Please circle one)

Driver's License #: _____ State of issue: _____ Exp. date: _____

Occupation (enter "student" if attending school) _____

Name of employer or school (if student) _____

Employer address _____
(No.) (Street/road) (City/State/ZIP)

Telephone numbers: Home _____ Work _____

How long have you resided in this area? _____

If less than 5 years, please attach a separate sheet listing previous addresses and the length of time you lived there.

Please indicate the type of service you wish to provide to the dept.

Emergency Services

Support Services

Fire Suppression _____

Food prep for emergencies _____

Emergency Medical Services _____

Fire-ground support/rehab _____

Administrative/Program Support _____

Public Education _____

Per-Diem FF/EMT _____

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If you have ever applied to or have been a member of a Volunteer Emergency Services Organization previously, list in the space provided below the company/department name, address, department telephone number, name of chief officer, date of separation, and reason for leaving. _____

Educational Background: Are you a high school graduate? _____
Name of high school and date of graduation (For high school equivalency, name and location of issuing government authority) _____

List all colleges or technical schools attended dates of attendance, and any degrees received:

Background information:
Have you ever been convicted of a crime? (Felony or misdemeanor) _____
If yes, please indicate the date, charge, location, court and disposition: _____

(Applicant must provide a certified copy of their driving record from the Division of Motor Vehicles and a certified copy of their criminal background check from the NH Division of State Police).

(Please note that a conviction does NOT represent an automatic bar to membership. Each case is considered and evaluated on an individual basis in relation to the duties and responsibilities you would perform as a department member. Persons with felony convictions are not able to sit for the National Registry of EMT's exam and therefore would not be eligible to become Emergency Medical Service providers)

References:
If employed, please list name, address, and phone number of your supervisor.
Name _____ Address _____
Telephone _____ Email address _____

If you have been or are currently a member of an emergency services organization, you must provide us with a letter from the head of the service stating your background in that department, including experience and training records.



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Certifications:

Do you hold any current medical/first aid/CPR certifications? Yes No

Do you hold any current firefighter certifications (i.e. FF-I, etc.) Yes No

If yes, please list: _____

Emergency Contacts:

Please list person(s) who should be notified in case of an emergency:

Name and relationship _____ Address _____

Telephone _____

I hereby make application for membership in the Chichester Fire-Rescue and certify that the statements made on this form and any other materials submitted with this application are true, under penalty of perjury. I understand that falsified information will be cause for denial of this application or termination of my membership, as well as possible legal action.

Signed: _____ Date: _____

I hereby authorize the Chichester Fire-Rescue and the Chichester Police Department to conduct a check of my background. I understand any information discovered in this background check will be kept confidential and this information will be used to determine suitability for membership in the Chichester Fire-Rescue.

Signed: _____ Date: _____

(FOR OPTICAL USE ONLY)

Date Received: _____ Background Check (Satisfactory/Unsatisfactory)

Date: _____ Approve: _____ Disapprove: _____

Chiefs Signature _____

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