

Grays Harbor Fire District #7

Job Announcements For Firefighter/EMT's



Hiring Process

- Application & Resume Review
- Interview
- Background Check
- Driver Abstract Review
- Medical Exam & UA
- Physical agility test

Benefits

- LEOFF 2 Retirement
- 100 % employee healthcare (Medical/Dental/Vision)
- Paid Sick Leave
- Vacation time
- Uniform Allowance

Compensation

- Monthly Salary \$4,080.00
- Overtime Eligible

Schedule

- 10-hour shifts
- 0900-1900
- Rotation of days 4 on, 4 off, 4 on, 3 off
- *Note 170 hours min. expected monthly



Job Announcement Summary

Grays Harbor Fire District #7 is accepting applications for three (3) immediate openings for the position of Firefighter/EMT. Entry Level and Lateral candidates are welcome to apply. Application period is open indefinitely, but the first batch of applications will be reviewed on **November 10th, 2023**, for processing. Applications received after positions are filled will remain on file with the District for future openings.

Minimum Qualifications

- High School Diploma or GED
- 18 Years of Age
- Authorized to work in the United States
- Ability to read, write, and speak the English language
- Valid Washington State Driver's License
- Ability to pass a driver's pre-employment screening
- Ability to pass a background screening
- Ability to pass pre-employment medical exam/UA
- Ability to pass physical agility test
- Current WA State EMT Certification upon hire.
- Pass GHC BLS Protocol Test within 45 days of hire
- IFSAC Firefighter 1 or equivalent
- EVIP Certification or ability to obtain

Headquarters Station
701 Copalis Beach Road
Copalis Beach, WA 98535

Phone #: 360-580-3586
Email: sselin@ghfd7.com

Area Overview

Grays Harbor Fire District #7 is a small rural Fire District that sits just off the Washington coastline and encompasses approximately 55 square miles. District 7 serves 1,000 residents but sees a large influx in population during spring and summer months due to tourism. The area may see an increase in population of up to 30,000 people on a busy day.

The District consists of mostly single-family dwellings, but also hosts a variety of other venues. Included in the District boundaries include miles of ocean beaches, a high school, a casino/resort, condos, recreational RV resorts, campgrounds, and several small businesses.

Department Overview

The District is a combination fire department comprised of mostly volunteers, and a few career staff members. Our department averages over 600 calls annually and is increasing every year.

Our service provides the community with fire protection, basic life support, hazmat responses, and other assists. Our agency contracts with neighboring agencies for advanced life support.

Currently the District has some paid staffed hours, but a majority of hours are covered by District volunteer responses, and automatic mutual aid agreements. The District is moving to placing two paid staff members on from 0900-1900 each day. Our hope is to continue to expand beyond these hours as finances allow, and our goal is to build station living quarters in the future.

The District is also in the process of combining with a neighboring fire department; Grays Harbor Fire District #16. This territory would become Grays Harbor Fire District #7 making our new territory covered approximately 95 square miles.

Operational Staff Positions

- Fire Chief
- District Secretary
- 3 Career Firefighter/EMTs (currently these positions are open)
- 7 Volunteer Firefighters

Facility Locations

- Fire Station/Copalis Beach
- Fire Station/Administrative/Ocean City
- Fire Station/North Bay

How to Apply?

- 1) Applicants should obtain a complete job application by emailing Chief Selin at sselin@ghfd7.com
- 2) Submit a complete employment application, resume, and relevant certifications by email to sselin@ghfd7.com

Selection Process

- 1) Completed applications will be reviewed.
- 2) Applicants will participate in an interview.
- 3) Conditional offers of employment for successful candidates will be extended by the Fire Chief at their discretion. Employment is subject to a one-year probationary period.



Grays Harbor Fire District #7 Member Application

Position Applying For

___ Volunteer Firefighter/ Under 18 ___ Volunteer Firefighter/ Over 18 ___ Career Firefighter/EMT

Applicant Information

Full Name: _____ Date: _____
Last First M

Mailing

Street Address Apartment/Unit #

City State ZIP Code

Physical Address

Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

Have you ever worked for our District? YES ☐ NO ☐ If yes, when? _____

Have you ever been convicted of a felony? YES ☐ NO ☐

If yes, explain: _____

Education

Name of School/University or Vocational School	Degree	Dates Attended From/To	Major
High School			
College			
College			
Other			
Other			

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

NO

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If other than honorable, explain: _____

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Reason for Leaving: _____

Related Experience/Certifications

Certifications	Expiration Date

*Please attach relevant certifications with application

Emergency Contact Information

Primary Contact Person

Name: _____

Relationship: _____

Phone #: _____

Secondary Contact

Name: _____

Relationship: _____

Phone #: _____

Potential Disqualifications for Membership

THE FOLLOWING ARE AUTOMATIC AND POTENTIAL DISQUALIFIERS. APPLICANTS SHOULD NOT APPLY TO OUR AGENCY IF THEY INDICATE ANY OF THE AUTOMATIC DISQUALIFIERS. POTENTIAL DISQUALIFIERS WILL BE CONSIDERED ON A CASE-BY-CASE BASIS.

Driving	
Automatic	1 or more traffic crime convictions in last 5 years (DWI, Suspended, Reckless, etc.)
Automatic	3 or more moving violations in the past 3 years.
Potential	Driving Records that indicate a pattern of infractions will be reviewed on a case-by-case basis and may be forwarded to our insurance provider to confirm compliance with policy requirements. All drivers subject to WSP driving record check.
Drug Use	
Automatic	No illegal sale of ANY drug, including marijuana.
Automatic	Pattern of illegal use of prescription medication.
Potential	All members are subject to drug testing.
Criminal Activity	
Automatic	Any adult felony conviction.
Potential	Adult misdemeanor convictions will be carefully reviewed.
Potential	Juvenile felony conviction will be carefully reviewed.
Automatic	Been convicted of any crime under a domestic violence statute.
Automatic	Unlawful sexual misconduct.
Potential	All members are subject to thorough background investigations prior to membership being offered.
Membership	
Automatic	Lied during any stage of the application process.
Automatic	Falsified his or her application, personal history questionnaire, or any other forms during hiring process.

Agreement

I hereby certify, under the penalty of perjury in the state of Washington, that this application contains no willful misrepresentation and that the information given is true and complete to the best of my knowledge and belief. I am aware that should an investigation at any time disclose any such representation or falsification, my application may be rejected, my name may be removed from consideration, or I may be discharged from employment.

I authorize my current and former employers and all schools or educational and technical institutions which I have attended to provide Fire Department representatives any information regarding my current and former employment, including performance, discipline and attendance, scholastic records or ratings. I hereby release any such current or former employers or institutions, their agents or employees from all liability resulting from the release of such information. My authorization and release from liability are knowing, intelligent and voluntary acts. I hereby waive any claims against Grays Harbor Fire District #7 for relying on any information from my prior employers. I am willing to submit to a pre-employment physical examination.

I understand that as a condition of employment I must provide documentation to prove my eligibility to obtain employment along with personal identification information as required by the Immigration Reform and Control Act of 1986.

I UNDERSTAND THAT MY APPLICATION WILL NOT BE CONSIDERED UNLESS IT IS SIGNED

Print Name: _____ Signature: _____ Date: _____

Applicants Under 18 years of age must have a parent/guardian sign below.

By signing below, as a bona fide parent or guardian of the minor making this application I hereby grant permission for the applicant to pursue volunteer membership with Grays Harbor Fire District #7 under the terms and conditions of the foregoing statements.

Print Name : _____ Signature : _____ Date : _____

Grays Harbor Fire District #7 considers applicants for all positions without regards to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or disability, or any other legally protected status.

This page is for internal use only

Date received:	By:	Followed up:	By:
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Prospective Member Tracking Sheet

Requirements	Date Completed	Pass	Fail	Initial
Basic Entry Requirements				
Drivers Abstract Check				
Criminal Background Check				
Medical Examination				
Drug Screening/UA				
*Ride Along (5 hours)				
Physical Agility Test/In House				
Oral Interview with Chief				

*Denotes volunteer firefighter applications only

Membership Status

Accepted for probationary membership? Circle one: YES or NO

Notes: _____

Fire Chief Signature: _____ Date: _____

Fire Chief Print Name: _____

Revised: 10/25/2023