

Bexar County ESD 11 is accepting applications for:

Firefighter/EMT

Salary \$41,100

Bexar County ESD 11 is a local government agency created by public vote to provide fire protection and emergency first responder services to the unincorporated area of eastern Bexar County. ESD 11 is in the process of accepting applications for the position of Firefighter/EMT – paramedic preferred.

ESSENTIAL JOB FUNCTIONS:

- Works with Shift Captain in charge.
- Follows directives of those in charge.
- Ensures all equipment is maintained in good working condition and ready at all times.
- Properly fills out fire and FRO/EMS reports.
- Ability to safely operate department apparatus
- Performs inspections and light maintenance on apparatus,
- Assures compliance with State mandated data collection and inspections.
- Responds to alarms and assists in the suppression of fires, including rescue, forcible entry, ventilating, and salvage work.
- Responds to FRO/EMS emergencies and provides appropriate level of care.

EXAMPLES OF WORK:

Depending on skills, training, and certification level and at the discretion of the officer in charge, responds to fire suppression situations and assists in providing emergency care to patients. Performs vehicle and station maintenance as needed/directed. Attends regularly scheduled training seminars, and maintains current certifications with the ESD 11 provided continuing education.

QUALIFICATIONS:

- High school diploma or equivalent.
- Certification from the Texas Commission on Fire Protection as (minimum) Basic Structural Firefighter or higher.

- Certification from Department of Health State Services as an EMT-B or higher (paramedic preferred).
- Valid Texas Department of Public Safety Class B Exempt Driver's License or Class B Exempt permit upon hire.

PHYSICAL REQUIREMENTS:

- Walking, standing, lifting and occasional carrying up to 100 lbs.
- Able to pass physical agility exam.
- Ability to pass medical physical exam.
- Ability to pass drug screen.
- Ability to pass yearly physical agility exam related to job functions

WORK LOCATION AND HOURS:

- Fire station, multiple indoor/outdoor work locations.
- Normal working tour comprises, two shifts(48hrs.) on duty followed by four shifts (96hours) off.
- Work in extreme environments (extreme heat, extreme cold and wet weather).

PRE-REQUISITES:

The Bexar County ESD 11 establishes the prerequisites for the position of Firefighter/EMT. Copies of documents and completed forms along with the completed application must be provided for all the items listed below before you enter the application process.

- High School Diploma or GED You must provide a copy of either a high school diploma or General Equivalency Diploma. If one cannot be provided initially, provide documentation on length of time to obtain.
- TCFP Firefighter Certification and or any other related TCFP certifications- TCFP certifications must not be expired and applicants must be in good standings with TCFP.
- Texas Department of State Health Services EMS certification- minimum EMT-B preferred higher. TDSHS certification must not be expired
- TXDPS Driver's license- minimum of Class B Exempt license or Class B Exempt permit upon hire. TX issued DL must not be expired. Applicants who do not hold a Texas DL shall submit their currently issued DL from the registered State.
- Waiver and Release It is very important that you read this form and write the statement indicated legibly in the space provided then sign. This form must be completed in order to participate in the physical assessment test.
- Application: Completely fill out the application. Do not leave any blanks. Use full names, addresses, zip codes
 and telephone numbers. An incomplete application may slow down or terminate the application process.
 Attach all copies of specified documents to the application and mail the completed packet to:

Emergency Services District 11 4511 Texas Palm Dr. Converse, Texas 78109

If all required copies of documents are not attached, the application will not be processed. Copies: You are responsible for your own copies. Staff cannot make copies for you. If you cannot obtain and/or complete these items, your application will be removed from the process, and you will not be considered for the position of Firefighter-Driver/Operator.

If additional information is required, please email: Rwendt@esd11.org

We have prepared the following information to assist you in the application process to answer any questions you may have. Continuation in this process is contingent upon successful completion of all required information, documents and testing. It is your responsibility to provide copies and other documents requested, incomplete applications are subject to rejection. This application packet should contain a job application, a waiver form, release form, copies of your driver's license and current certifications. Completed applications can be mailed to the Bexar County ESD 11 office addressed to: **ESD11 FF/EMT Job Applicant**, 4511 Texas Palm Dr. Converse, TX 78109. **The application must be postmarked by 01/14 /2021**. Applications may also be dropped off to the above address during **normal business hours**. Applicants who move on to the panel interview portion will be scheduled for an interview.

Thank you and we look forward to meeting you.

John True ESD 11 Board President



Bexar County Emergency Services District No. 11 Employment Application

An Equal Opportunity Employer

Important Instructions for completing the application:

- Please TYPE or PRINT in INK
- Applications are accepted only for job titles for which recruitment is currently being conducted.
- All information requested must be completed on the application. Incomplete or illegible applications will not be processed.
- This application form and its attachments are official property of the Bexar County Emergency Services District No. 11 and will not be returned, reused or copied for you after being submitted. You should retain a copy of this application for future use or reference.
- Excessive or nonessential attachments will not be referred to the hiring department. Only information necessary to complete the application should be attached. Examples of work, awards, letters, etc., may be taken to interview.
- If more space is needed to give full answers or explanations, attach additional sheets referencing the item number, your name, social security number and job title applied for. Staple attachments to the application.
- Only United States citizens or individuals who are legally entitled to work in the United States are eligible for employment.
- The Bexar County Emergency Services District No. 11 affords equal employment opportunity to all individuals regardless of race, color, national origin, sex, religion, age, qualified disability status or veteran status.
- If you require an accommodation during the application/interview process, please call 210-467-5878.
- Reimbursement for travel expenditures during a testing or interview process is not available.
- Please make sure you meet the minimum qualifications and the application deadline.
- Applications must be submitted by mail.

Section A: Answer all questions.					
1. Official Job and Title		2. Date of Application			
3. Social Security #		4. Date of Birth			
i. Last Name 6. First		t Name		7. Middle Name	
8. Mailing Address	9. City		10. State	11. Zip	

12. Cell Phone #	13. Home Phone #	14. Email Ad	dress			
15. Driver's License #	16. State Is	ssuing License	17. Class or Type of License			
18. Can you, upon employment, submit documentation verifying your identity and your legal right to work in the United States?						
☐ Yes ☐ No						
19. Check the schedules you are willing to work:						
☐ Other than 9AM-6PM	☐ Other than 9AM-6PM ☐ Weekends/Holidays ☐ Full Time ☐ Part Time					
20. Are you presently en	nployed? If yes, specify	y where				
☐ Yes ☐ No S	Specify:					
21. Have you ever been	terminated or asked to	resign from a previous em	nployer?			
☐ Yes ☐ No						
22. Are you over the age	e of 18? If yes, can you p	provide proof of your eligi	bility to work?			
☐ Yes ☐ No						
23. If you are related to a	ny BCESD 11 employe	es? If yes, specify names,	relationship and department:			
24. Are you able to perform without, reasonable according to the second		ctions of the job for which	h you are applying, with or			
□ Yes □ No						
25. If you have been employed or attended school under other names, list names and dates of use:						
26. Dates of Military Ser	vice	Branch of Service				
From:	То:					
Section B: Answer all que	estions.					
27 Have you ever been convicted of a crime (misdemone), follow, or military court martial)?						
27. Have you ever been convicted of a crime (misdemeanor, felony, or military court martial)?						
☐ Yes ☐ No						
28. Have you ever been placed on probation?						
☐ Yes ☐ No						
29. Have you ever been placed on deferred adjudication?						

☐ Yes ☐ No							
30. Are there criminal charges currently pending against you?							
☐ Yes ☐ No							
31. For any yes answer to questions 25-29, list type or offense, location and fine or sentenced received. Convictions do NOT necessarily disqualify an applicant from employment consideration.							
Convictions do NOT necessarily	y disquality an ap	oplicanti	rom e	mployment cons	ideration	1.	
Section C: Education, Certification	n, Licenses & Ado	ditional Sk	kills				
Do you have a High School Dip	loma or GED?	Check	highes	st level of comple	etion:		
☐ Yes ☐ No		☐ Son	ne HS	☐ HS/GED ☐	Some C	College [Associate
			helor	☐ Master ☐ Do	octoral		
College or University Name	or University Name From To		To Major Degree		earned	Sem. Hours	
1.							
2.							
3.							
License or Certifications		Date Earned			Expirat	ion Date	
1.							
2							
3.							
4.							
5.							
In what language(s) other than English are you proficient?							
1.							
2. □ Speak □ Read □ Write							
Additional Skills: List equipment which you are applying.	nt, software, spec	cialized s	systen	ns or other skills	that are	related to	the job for

Section D: List jobs in reverse of including volunteer, part-time, ter				
duties preformed. Do NOT substi				
the same format if more space is	needed.			
Employer	Address	Address		State and Zip Code
		l =		
Job Title		From (Month/Year)		To (Month/Year)
Hourly or Salary Rate	Hours per V	Veek	Reas	on for Leaving
Supervisor's Name	Supervisor	Supervisor Phone #		we contact this supervisor?
				es 🗆 No
Duties:				
Employer	Address		City,	State and Zip Code
Job Title		From (Month/Year)		To (Month/Year)
Hourly or Salary Rate	Hours per V	Veek	Reas	on for Leaving
Supervisor's Name	Supervisor	Phone #	May	we contact this supervisor?
			ПΥ	es 🗆 No
Duties:				

Employer	Address	City, State and Zip Code
Job Title	From (Month/Year)	To (Month/Year)
Hourly or Salary Rate	Hours per Week	Reason for Leaving
Supervisor's Name	Supervisor Phone #	May we contact this supervisor?
		☐ Yes ☐ No
Duties:		
Employer	Addrass	City State and Zin Code
Employer	Address	City, State and Zip Code
	Address From (Month/Year)	City, State and Zip Code To (Month/Year)
Job Title		
Job Title	From (Month/Year)	To (Month/Year)
Job Title Hourly or Salary Rate	From (Month/Year)	To (Month/Year)
Job Title Hourly or Salary Rate	From (Month/Year) Hours per Week	To (Month/Year) Reason for Leaving
Job Title Hourly or Salary Rate Supervisor's Name	From (Month/Year) Hours per Week	To (Month/Year) Reason for Leaving May we contact this supervisor?
Job Title Hourly or Salary Rate Supervisor's Name	From (Month/Year) Hours per Week	To (Month/Year) Reason for Leaving May we contact this supervisor?
Employer Job Title Hourly or Salary Rate Supervisor's Name Duties:	From (Month/Year) Hours per Week	To (Month/Year) Reason for Leaving May we contact this supervisor?

Empleyer	A del		014.	State and 7in Carla		
Employer	Address		City,	State and Zip Code		
Job Title	Fr	om (Month/Year)		To (Month/Year)		
Hourly or Salary Rate	Hours per Wee	Hours per Week		Reason for Leaving		
Supervisor's Name	Supervisor Pho	ne#	May	we contact this supervisor?		
				☐ Yes ☐ No		
Duties:						
References: Name	Relationship/ (Occupation	Phon	e#		
References: Name	Relationship/	Occupation	Phon	e#		
	Relationship/ (Occupation	Phon	e#		
1.	Relationship/ (Occupation	Phon	e#		

Drug Free Work Environment: Bexar County ESD #11 is committed	to providing a cofe officient	
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drug-free work environment for all employees. In keeping with this co	•	
openings will be required to provide body fluids (blood or urine) to de	· · · · · · · · · · · · · · · · · · ·	
or controlled substances. Failure of the drug/alcohol screen will resul	t in denial of employment.	
Falsification of Information: I hereby certify that all statements made	de on this application and	
attachments are true and correct to the best of my knowledge and be	elief. I understand that any false	
statement, misrepresentation or omission made by me on this applic	ation or subsequent interview(s)	
could cause me to be ineligible for employment or terminated from e	mployment. Further I understand	
that I am required to abide by all rules and regulations of Bexar Cour	nty ESD #11.	
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Verification of Information: I authorize Bexar County ESD #11 and	its agents to investigate and verify	
the facts claimed by me on this application. I further authorize my for	· · ·	
information requested by Bexar County ESD #11. I understand that ϵ		
criminal background check, drug screening and/or review of the drivi	. ,	
County ESD #11 and it agents from all liability in making any investig	· ·	
information contained in the application form.	gation and inquity relative to	
information contained in the application form.		
Lundaratand that nothing in this application or in any prior or subseq	uent written er erel etetement	
I understand that nothing in this application or in any prior or subseq		
creates a contract of employment or any rights in the nature of a con	tract. I agree to submit to medical	
examination and drug screening, if required.		
Bexar County ESD #11 participates in all State and Federal law, requ		
identity and employment eligibility of all persons hired to work in the	·	
#11 will provide the Social Security Administration (SSA) and, if necessary		
Homeland Security (DHS), with information from each new employee	's Form I-9 to confirm work	
authorization.		
I understand that, if accepted, this application does not constitute a	contract of employment for any	
specific period of time. I further understand that all employment is at will and may be terminated by		
notification from either party at any time, with or without cause, and without prior notice.		
☐ I have read and agree to the above statements		
Signature:	Date:	
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WAIVER AND RELEASE

In consideration of my being permitted to take the connection with my application for the position of advised that as a part of this assessment, it will be my strength, endurance, and physical ability in a	Firefighter/Officer, and having been be necessary for me to demonstrate
I,	nd employees from any and all of action whatsoever which may e that I may sustain as a result of
PLEASE COPY THE FOLLOWING STATEMENT LEG HANDWRITING:	GIBLY AND IN YOUR OWN
"I CERTIFY THAT I HAVE READ THE FOREGO UNDERSTAND ITS PROVISIONS."	OING WAIVER AND RELEASE AND
	SIGNATURE OF APPLICANT