



City of Mentor

8500 Civic Center Blvd. • Mentor, OH 44060-2499 • (440) 255-1100

CIVIL SERVICE COMMISSION

*Jim Struna, Chairman
Diane Pauley, Co-Chair
Dan Llewellyn, Member
Sharon Glady, Recording Secretary*

JOB OPPORTUNITY

Job Title: Full-Time Firefighter/Paramedic

Date Posted: July 6, 2018

Department: Fire Department

Annual Salary: \$57,529.94 to \$80,700.36

Work Description: Under supervision, extinguishes fires, provides emergency medical service, carries out home and building inspections and maintains equipment in constant readiness to respond to emergency situations. Duty schedule normally consists of 24-hour shifts. Firefighters perform hazardous tasks under emergency conditions, which may require strenuous exertion under such handicaps as fire, smoke and cramped surroundings.

Qualification Requirements: High School grad or GED equivalent. Must be a State-of-Ohio-Certified Paramedic or currently enrolled in a paramedic course. Must be at least 20 years of age to take the test and 21 years of age at time of appointment/hire. Must have valid driver's license. Must successfully complete a multi-stage examination process. All qualifications are pursuant to State and Local Law. Per City of Mentor Codified Ordinance, not eligible for appointment on or after their 36th birthday.

You must submit an application to participate in the Written Exam and you must take the Written Exam to be considered for the Eligibility List and Appointment. Applications will be accepted at the Civil Service Commission in the City Manager's Office, 3rd Floor, 8500 Civic Center Blvd., Mentor from **July 23 – August 3, 2018 from 9:00 am – 4:30 pm, Weekdays Only.** Application packets are also available online to print at www.cityofmentor.com. See Fact Sheet for detailed information.

Last Date for Registration is Friday, August 3, 2018 at 4:30 pm

A \$20 cash, or money order, filing fee must be submitted with the completed application

No personal checks, credit or debit cards accepted

***The Written Exam will be on Thursday, August 16, 2018 at the**

Mentor Senior Center, 8484 Munson Road, Mentor

Sign-in begins at **6:00 pm** – Testing will start promptly at **6:30 pm**

Submit application to the Civil Service Commission, Mentor City Hall – 3rd Floor,
8500 Civic Center Boulevard, Mentor, OH 44060 Tel: 440-974-5790

Mentor is an Equal Opportunity Employer – M/F/V/H



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FULL-TIME FIREFIGHTER/PARAMEDIC

Entrance Examination Fact Sheet

2018

Applications for the Written Entrance Exam* for Firefighter/Paramedic will be accepted between the hours of 9:00 am and 4:30 pm, beginning **Monday, July 23rd through Friday, August 3rd**. There is a \$20 filing fee to be paid when application is submitted (no personal checks, debit or credit cards accepted). If mailing the application, be sure to include the \$20 filing fee (cash or money orders only), as well as copies of proof for extra points. Applications postmarked by Friday, August 3, 2018 will be accepted. Mailed applications will be date/time stamped by the Recording Secretary when received. Date and time that an application is received will be used as a tie-breaker to determine final ranking on the Eligibility List. Candidates must be at least 20-years old at time of application and at least 21-years old at time of appointment/hire by the City. "No person is eligible to receive an original appointment as a Mentor Firefighter on or after the person's 36th birthday." *Mentor Codified Ord. 159.05.*

Applicants must be certified Paramedics or enrolled in a Paramedic course at the time of application. Proof of enrollment in paramedic school or proof of certification must be submitted with the application. Applications will not be accepted without a copy of proof.

Extra Points Added to Written Exam Score:

- Applicants who receive a passing grade on the Written Exam who have successfully completed the Ohio Full-Time Firefighter Recruit Training Program/Firefighter II shall receive an additional credit of two (2) points. A copy of your Certificate or a Letter of Proof of completion must be submitted with the application.
- Veteran applicants who have proof of Honorable Discharge (DD214 Long Form with signatures/Member 4 copy) or proof of current active duty service in "good standing" (signed letter stating "Good Standing" from C.O.), will be awarded two (2) points to their passing grade on the Written Exam. A copy of proof of military service must be received by the Civil Service Recording Secretary by the last day of filing applications, August 3, 2018.
- Applicants who receive a passing grade on the Written Exam and are currently employed as Part-time Mentor Firefighters and have completed their probationary period, shall receive an additional one (1) point of credit for each full year of service as a Mentor Part-Time Firefighter, not to exceed five (5) points total in accordance with the Civil Service Code. Years of service will be based on the applicant's anniversary date. Applicants will be awarded service credit as of the date of the written test, August 16, 2018.

* **Written Exam** will be held:

Date: **Thursday, August 16, 2018**

Time: **Registration: 6:00 pm**
Exam Begins: 6:30 pm

Location: **Mentor Senior Center**
8484 Munson Road, Mentor, OH 44060
Enter through the rear parking lot entrance

A valid Driver's License must be presented for check-in at the Written Exam.

You must participate in the following to be eligible to be appointed to the position of Firefighter/Paramedic: Written Examination, Tri-C Physical Agility Test, Background Investigation, Polygraph Examination, Medical Examination, Psychological Test, Drug Screening and Oral interviews. Must be a U.S. Citizen at time of appointment.

Please Note: To be processed for possible appointment/hire, you must have a valid Tri-C Physical Agility Certificate (not more than 12 months old); cost for this is at candidate's own expense. Physical Agility certification is not needed to take the Written Exam.



DRUG USAGE POTENTIAL DISQUALIFICATIONS

Any illegal use of a controlled substance within the listed time limits preceding the date of application:

- | | <u>LIMIT</u> |
|---|--------------|
| • Marijuana | 3 years |
| • Schedule 1 Drugs (as defined in the Ohio Revised Code)
<i>Examples (but not limited to):</i> <ul style="list-style-type: none">○ Ecstasy○ LSD/Acid○ Heroin○ Mushrooms○ Psychedelic Drugs○ Club Drugs○ Rohypnol○ PCP – Angel Dust○ Bath Salts | EVER |
| • Schedule 2 thru 5 Drugs (as defined in Ohio Revised Code) <ul style="list-style-type: none">○ Cocaine○ Opium○ Ketamine○ Amphetamines○ Oxycodone○ Anabolic Steroids○ Morphine○ Fentanyl○ Valium○ Methamphetamines○ Hydrocodone with aspirin/acetaminophen○ Adderall○ Ritalin○ Methadone○ Barbiturates○ Cough Suppressants with Codeine | 5 years |
| • Inhalants
<i>Examples (but not limited to):</i> <ul style="list-style-type: none">○ Whippets○ Paint○ Solvents○ Nitrates○ Propellant gases○ Toluene | 5 years |

NOTE: Consideration MAY be given on a case by case basis in circumstances of isolated use of certain drugs as verified in the polygraph questionnaire.



**NON-FAVORABLE CONSIDERATION SHALL BE GIVEN TO AN
APPLICANT WHO POSSESSES:**

Classification as an **UNACCEPTABLE DRIVER**; defined as one who, during the previous five (5) year period, has received:

1. A conviction for one (1) of the following:
 - Drag racing.
 - Driving while under the influence of alcohol or drugs.
 - Vehicular homicide.
 - Leaving the scene of an accident.
 - Willfully eluding or fleeing a police officer after a traffic violation.
 - Driving under suspension.
 - Failure to maintain financial responsibility (insurance).
 2. Two (2) or more chargeable or “at fault” accidents; the nature and severity of the accident to be taken into account.
 3. Three (3) moving violations for which a total of six (6) or more points were received.
 4. Any combination of one (1) chargeable or “at fault” accidents, and two (2) moving violations.
 5. A second driving under the influence conviction in their lifetime.
-
1. Conviction of:
 - A **FELONY** in the State of Ohio, or an offense in another state that would be a felony if committed in the State of Ohio.
 - Any offense involving **MORAL TURPITUDE**.
 - A **SEX CRIME** (as defined by ORC 2907). Examples (but not limited to):
 - Unlawful sexual conduct with a minor.
 - Sexual Imposition.
 - Public Indecency.
 - Voyeurism.
 - Procuring.
 - Solicitation.
 - Loitering to engage in solicitation.
 - Prostitution.
 - Exposing juveniles to harmful materials.
 - Deception to obtain matter harmful to juveniles.
 - **CONTRIBUTING TO THE DELINQUENCY OF A MINOR.**
 - **PROVIDING ALCOHOL TO A MINOR.**



- PROVIDING FIREARMS TO A MINOR.
 - An offense involving the unlawful use, sale, manufacture, production or possession of a controlled substance.
 - An offense involving the unlawful use, sale manufacture, production or possession of prescription drugs.
 - DOMESTIC VIOLENCE or related offenses.
 - ASSAULT or other act of physical violence.
 - OBSTRUCTING JUSTICE.
 - OBSTRUCTING OFFICIAL BUSINESS.
 - RESISTING ARREST.
 - DESTRUCTION OR DAMAGE TO PRIVATE PROPERTY.
 - ILLEGAL USE/INVOLVEMENT WITH FIREARMS.
 - INDUCING PANIC.
 - IMPERSONATING AN OFFICER.
 - MISCONDUCT AT AN EMERGENCY.
 - FRAUD.
 - SECOND OFFENSE OF USE OF FIREWORKS.
 - TELEPHONE HARASSMENT.
 - FILING FALSE POLICE REPORT.
 - THEFT.
 - MENACING.
 - RECEIVING STOLEN PROPERTY.
2. Has a criminal proceeding pending or is under investigation for a crime.
 3. Being a registered SEX OFFENDER.
 4. Being on PAROLE OR PROBATION for any criminal matter.
 5. Repeated incidents involving alcohol use or abuse.
 6. Involvement with STREAKING OR MOONING activities within 5 years.
 7. MASTURBATION when there is the possibility of view by public.
 8. Involvement with VOYEURISM.
 9. Involvement with any aspect of PROSTITUTION.
 10. An affiliation with, and/or support of, any organization or group which advocates the overthrow of the State or of the United States Government, or whose professed goals are contrary to the interests of public safety and welfare.
 11. Alcohol or controlled substance abuse which has hampered job performance at any time during the five years immediately preceding the date of application.
 12. Deceptive results of a polygraph or CVSA examination regarding the applicant's background.
 13. Evidence that the applicant has willfully provided false or misleading information at any time during the application process, in his/her written application, oral interview or Personal History Statement, or has cheated during any testing in the application process.



14. Any conclusion brought about by the investigation that applicant is unsuited for Fire/EMS work.
15. Prior termination for cause from a Fire/EMS agency.
16. Separation from any branch of the United States Armed Forces with a **GENERAL DISCHARGE** or **LESS THAN HONORABLE** conditions or for reasons of unsuitability or misconduct or with the ineligibility of re-enlistment.
17. A conclusion by any physician, psychiatrist or psychologist which questions the applicant's suitability to perform the duties of a Firefighter/Paramedic.
18. Drug usage (see DRUG USEAGE DISQUALIFICATION attachment).



FACTORS TO BE CONSIDERED ON A CASE BY CASE BASIS

The following factors will be considered as a basis for the applicant's rejection:

1. Commission of undiscovered crimes.
2. Events of delinquency as a juvenile.
3. Conviction of D.U.I. and other driving record more than 5 years preceding the date of application.
4. Unfavorable recommendations from past/present references, employers, creditors, landlords, or neighbors.
5. A demonstrated lack of financial responsibility.
6. A history of sporadic or inconsistent employment.
7. Involvement in criminal or questionable activities, whether or not arrested.
8. Questionable character or fortitude.
9. Inability to control temper.
10. Personal reputation.
11. Inability to accept responsibility.
12. Previous employee history, to include (but not limited to):
 - a. Abuse of sick time
 - b. Disciplinary record
 - c. Work ethics/quality
 - d. Punctuality and dependability
13. Any other factor or combination of factors, which would limit, or prohibit, the applicant's suitability to perform the duties of a Firefighter/Paramedic.



LETTER OF UNDERSTANDING

I am applying for a position with the Mentor Fire Department. I understand that there are certain requirements I must meet before I can be accepted into this position. I understand that I must submit to an extensive background investigation, which consists of the following areas of concern, at a minimum:

- Review of my completed Application and Personal History Statement.
- Thorough criminal background check.
- Thorough examination of prior employment.
- Examination of my personal credit/financial report.
- Tests and evaluations of skills or abilities.
- Candidate background questionnaire/evaluations.
- Polygraph examination/pre-job offer.

Results of this investigation will be evaluated and a preliminary decision as to my potential suitability for employment will be made. I may, at this point, receive a conditional offer of employment, which will be followed by completion of some, or all, of the following tests:

- Additional polygraph examination/post job offer.
- Standard medical examination/hearing test/drug screening test.
- Evaluation of Personal History Questionnaires or other testing measures.
- Psychological evaluation.

The aforementioned tests will be administered in a manner selected by the Mentor Fire Department. I understand that the results of the tests are the property of the agency to which I have applied and that I will not receive copies of the reports, nor any information contained in them, except as it may relate to a serious condition discovered by the examining physician.

These tests will be evaluated in light of the requirements of the job along with the previous information and will be used to make a final decision as to my suitability for employment.

I agree to assist in the expedient conclusion of these reviews and examinations. I understand that successful completion of this process does not guarantee employment with the Mentor Fire Department, only that I will be considered for positions as they become available, pursuant to established rules and regulations of the Mentor Fire Department. I have read and understand the content and purpose of this Letter of Understanding. I agree to abide by these requirements as a condition of employment with the Mentor Fire Department.

Printed Full Name of Applicant: _____

Signature of Applicant: _____ **Date:** _____



CERTIFICATION AND PENALTY

I hereby certify that the statements made by me on this application are true, complete and correct to the best of my knowledge. I understand and agree that any misstatement of material fact contained in this application may cause rejection of this application, removal of my name from the eligible list and dismissal from City Service, and hereby authorize investigation of any and all statements contained in this application. I understand that misrepresentation or omission of facts requested is grounds for dismissal in the event I enter into the employ of the City of Mentor. I understand and agree that my employment is subject to the rules and regulations of the City of Mentor Civil Service Commission, the Ordinances of the City of Mentor, and the rulings of the City Manager and/or Department Heads, the Rules and Regulations of the Mentor Fire Department, and the Agreement between the City of Mentor and Mentor Professional Firefighter Association.

PRE-EMPLOYMENT INVESTIGATION DISCOVERY WAIVER

As an applicant to the Mentor Fire Department for the position of Firefighter/Paramedic, I recognize that an employing fire department has a legal, as well as a moral obligation, to make every reasonable effort to ensure that persons employed by them as firefighters, or in other positions, conform to the very highest standards.

Therefore, I release and hold harmless the Mentor Fire and Police Departments, City of Mentor, and their officers, agents, or assigns, now and in the future, from any claim or damages in law of inequity on behalf of myself, my heirs and assigns, for their refusal to make available any and all of the information contained in this pre-employment investigation, including, but not limited to, the identity(ies) of any person(s) and/or organizations(s) that may have supplied information in the course of this investigation, as well as the substance of any information supplied.

I hereby waive my right, now and in the future, to examine, review, or otherwise discover the contents of this investigation and all related documents thereto.

Printed Full Name of Applicant: _____

Signature of Applicant: _____ **Date:** _____



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Dan Llewellyn, Member

Date Rcv'd: _____

Time Rcv'd: _____

Rcv'd By: _____

FULL-TIME FIREFIGHTER/PARAMEDIC APPLICATION 2018

CITY OF MENTOR

An Equal Opportunity Employer
8500 Civic Center Blvd., Mentor, Ohio 44060

(PLEASE TYPE OR PRINT CLEARLY)

NAME _____ SSN _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

HOME PHONE: _____ BEST TIME TO CALL: _____

MAY WE CONTACT YOU AT WORK? _____ IF YES, WORK # AND BEST TIME TO CALL: _____

E-MAIL ADDRESS: _____

DRIVERS LICENSE #: _____ EXPIRATION DATE: _____

ARE YOU A U.S. CITIZEN OR OBTAINING CITIZENSHIP? _____

ARE YOU A CERTIFIED PARAMEDIC? _____ CERTIFICATION #: _____

DO YOU HAVE A HIGH SCHOOL DIPLOMA OR G.E.D. EQUIVALENCY? _____

ARE YOU AT LEAST 20 YEARS OF AGE, BUT NOT YET 36 YEARS OF AGE? _____

DATE OF BIRTH: _____

ARE YOU WILLING TO SIGN A WAIVER AND TAKE A PHYSICAL AGILITY TEST, POLYGRAPH EXAM, DRUG SCREENING, MEDICAL EXAM AND PSYCHOLOGICAL EVALUATION? _____

HAVE YOU EVER BEEN REMOVED FROM FURTHER CONSIDERATION AFTER TAKING A CIVIL SERVICE EXAM FOR THE CITY OF MENTOR? _____ IF YES, GIVE DATE: _____

ARE YOU A GRADUATE OF OHIO FIREFIGHTER TRAINING PROGRAM (LEVEL II)? _____ TO RECEIVE 2 EXTRA CREDIT POINTS, A COPY OF YOUR CERTIFICATE MUST BE SUBMITTED WITH THIS APPLICATION.

ARE YOU A VETERAN OF ANY UNITED STATES ARMED SERVICES? _____
IF SO, TO RECEIVE 2 EXTRA CREDIT POINTS, ATTACH A COPY OF YOUR DISCHARGE PAPERS (DD214 LONG FORM STATING, "HONORABLE DISCHARGE" WITH SIGNATURES, OR "MEMBER 4" PAGE).

OR, ARE YOU CURRENTLY ON ACTIVE DUTY IN "GOOD STANDING"? _____
IF SO, TO RECEIVE 2 EXTRA CREDIT POINTS, ATTACH A LETTER STATING, "ACTIVE IN GOOD STANDING", SIGNED BY YOUR COMMANDING OFFICER. MILITARY ID'S ONLY ARE NOT ACCEPTABLE PROOF OF GOOD STANDING. PROOF OF MILITARY SERVICE MUST BE RECEIVED BY AUGUST 3, 2018, 4:30 PM TO RECEIVE CREDIT.

ARE YOU CURRENTLY EMPLOYED BY THE CITY OF MENTOR AS A PART-TIME FIREFIGHTER AND HAVE YOU COMPLETED YOUR PROBATIONARY PERIOD? _____ HIRE DATE, IF KNOWN: _____
SEE FACT SHEET FOR DETAIL OF EXTRA CREDIT POINTS AVAILABLE FOR PART-TIME MENTOR EMPLOYEES.

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES / NO (circle one)

IF SO, EXPLAIN IN DETAIL: _____

1. I hereby certify that the statements made by me on this application are true, complete and correct to the best of my knowledge. I understand and agree that any misstatement of material fact contained in this application may cause rejection of this application, removal of my name from the eligible list and dismissal from City Service, and hereby authorize investigation of any and all statements contained in this application. I understand that misrepresentation or omission of facts requested is grounds for dismissal in the event I enter the employ of the City of Mentor. I understand and agree that my employment is subject to the rules and regulations of the City of Mentor Civil Service Commission, the Ordinances of the City of Mentor, and the rulings of the City Manager and/or department heads, the Rules and Regulations of the Mentor Fire Department, and the Agreement between The City of Mentor and Mentor Professional Firefighter Association.
2. I further understand that to be processed for possible appointment/hire as a FT Firefighter/Paramedic, I must have a valid TRI-C physical agility certificate; cost of which is at my own expense, and it is my responsibility to make sure I have a current physical agility certificate before being hired by the City of Mentor. I also hereby release the City of Mentor from any injuries that might occur during said agility test; and, waive all objections to said test.

Signature of Applicant: _____ Date: _____

This form, when completed, must be returned to the Civil Service Commission Recording Secretary by **Friday, August 3, 2018, at 4:30 pm**

FILING FEE: \$20.00 – TO BE SUBMITTED WITH APPLICATION (CASH OR MONEY ORDER ONLY)
NO PERSONAL CHECKS, CREDIT OR DEBIT CARDS ACCEPTED

CIVIL SERVICE RECORDING SECRETARY: Civil Service Commission
City Manager's Office
8500 Civic Center Blvd., 3rd Floor
Mentor, Ohio 44060
(440) 974-5790

Hours of Application Acceptance: 9:00 am to 4:30 pm
Monday – Friday, July 23 – August 3, 2018

*****Late or incomplete applications will not be accepted.*****



CITY OF MENTOR

Equal Employment Opportunity Questionnaire

The following information would be appreciated on a voluntary basis for compliance with governmental reporting requirements, such as for Equal Employment Opportunity (EEO) Reports. It will be detached when your application is filed, and it will not be considered in the employment process.

1. Your name _____ (optional)
2. Job applied for Full-Time Firefighter/Paramedic
3. Sex (please check) Male Female
4. Describe yourself in terms of one of the following groups: (Please check one)
 - A. American Indian/Alaskan Native D. Hispanic/Spanish Surnamed
 - B. Black/African American E. Asian/Pacific Islander
 - C. White/Caucasian F. Other: _____
(please specify)
5. How did you hear about this job? (please check one)
 - A. Newspaper (please give name): _____
 - B. Mentor Channel 12
 - C. Professional Journal (please give name): _____
 - D. Community Agency (please give name): _____
 - E. Ohio Bureau of Employment Services
 - F. City of Mentor Website (www.cityofmentor.com)
 - G. Other (please specify): _____

Date: _____