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Welcome

Whether full time, part time or volunteer firefighters are the same, what will differentiate you from others is the work ethic and dedication you put forth. Your interview starts right now, completing this application and will continue for the rest of your career.

ESTA prides itself on training and developing dedicated recruits to prepare them for both a physically and mentally challenging career. This academy is unlike others you will find, a hybrid course where your study and tests are online, and classroom is minimal primarily being hands on. Your body will be pushed and stressed under extreme heat and exhausting work and for that reason fitness is extremely important to us.

If this class meets your needs and you are prepared to dedicate your time to completing our program, we welcome you. We work hard to maintain a positive learning environment but that is determined by the work and effort you put in to meet deadlines, test minimums, and work level.

Please sign below acknowledging you have read the welcome letter

Signature

Date

Print Name



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Recruit Application Packet

The following packet contains the required forms to apply for ESTA starting September 6th. These forms include the informational page, class breakdown, registration, liability waiver and release, and ESTA schedule. Please make sure you review all the forms complete the checklist and return everything when applying. Also attached are both job applications for Snohomish County Districts #7 and #26. Follow the instructions and should you have further questions please contact Capt. Titland or DC Spence.

Application Checklist:

- () Non affiliated payment of \$1500
- () Completed Application incl T-Shirt size
- () Completed Waivers and Release
- () High School Diploma, GED, or equivalent
- () Copy of valid Driver's License
- () Copy of Current CPAT
- () Medical Waiver

Colby Titland
Training Captain
8010-180th ST SE
Snohomish, WA 98296
425-359-0372
360-668-6234 (fax)
ctitland@snofire7.org

Jarrod Spence
Deputy Chief of Support Services
501 Lewis Ave
Gold Bar, WA 98251
425-232-4979
360-793-8998
JSpence@snofire26.org



EAST SNOHOMISH TRAINING ACADEMY



Dear Prospective Student:

We are now accepting applications for the next Firefighter Recruit Academy.

Enrollment Process:

- Complete the enclosed student application form. Attach a copy of each document ***requested (refer to the Applicant checklist on the Registration Form Bottom Left)***.
- Return your completed application and check to:

Snohomish County Fire District #26
Attn: Deputy Chief Spence
PO Box 376
Gold Bar, WA 98251

- ***Please note that incomplete applications will not be accepted.***

Location of the Academy:

- The Firefighter Recruit Academy will be held at Snohomish County Districts 26, 7 and 4.

Class Days/Times:

Mondays, Wednesdays 1800-2200

Saturdays and some Sundays 0700-1700

Acceptance into the Academy:

Print this application packet and fill it out completely and accurately. Once you have the application completed, and have provided all valid/current documentation, you will be sent a letter stating your acceptance into our program.

Course Description:

The Firefighter Recruit Academy prepares the candidate to take Firefighter 1 and 2, Hazmat Awareness and Ops obtaining their IFSAC certifications upon successful completion of the program.

This academy requires a dedicated effort from the candidate in classroom studies, practical activities, and physical agility to reach the high standards that are required to pass the State exams. Written exams and practical evaluations follow each unit of study. Additionally, there is a physical training program that is designed to improve your overall performance during the academy. The academy schedule, expectations, and operational guidelines will be presented to all candidates the first day of class.



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Attendance and Grades:

Strict attendance records are maintained. Full participation in all activities is vital to the learning process. Missing more than 3 scheduled days of instruction will result in an automatic withdrawal from the academy and no refund. A minimum overall grade average of 80% is required for the candidate to be eligible to take the State exam.

Cost Breakdown – includes the following **\$1500.00**

- Firefighter 1 - Tuition
- Firefighter 2 - Tuition
- Haz Mat Awareness- Tuition
- Haz Mat Ops - Tuition
- Text book and Workbook (6th Edition IFSTA Fire Essentials)
- Structural Fire Personal Protective Gear (for non-affiliated candidates)
- Live Fire Training
- IFSAC Testing fees
- Academy T-Shirts
- Weekend Lunches

Not Included but required- Includes the following

- Medical Physical Exam - Due at a later date if accepted
- Candidate Physical Agility Test (CPAT) - *required current CPAT at time of application. **Applications will not be accepted without proof of current CPAT***
- Uniform- Available at Kroesen's Uniforms
 - Navy Blue Pants
 - Black Duty Belt
 - Black 8 inch Boots (must be able to polish)



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REGISTRATION FORM(PLEASE PRINT)

T-Shirt Size:(CIRCLE ONE) **Small** **Medium** **Large** **Extra Large**

Name: _____ Date of Birth: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: () _____ Cell Phone: () _____

Email: _____

Emergency Contact/Phone: _____ () _____

Emergency Medical Certification:(CIRCLE ONE) None FR EMT-B EMT-P

Are you affiliated with a Fire Department:(CIRCLE ONE) Yes No

Agency Affiliation: _____

Agency Contact/Title: _____

Phone: () _____ Email: _____

Billing address: _____

City: _____ State: _____ Zip: _____

Agency Signature:(If Affiliated) _____

Candidate Signature: _____

List any current or previous Fire Service/Medical Training: _____

What do you plan to achieve by completing the academy? _____



EAST SNOHOMISH TRAINING ACADEMY



Applicant Liability Waiver and Release Agreement

I am applying to be a part of the East Snohomish Training Academy with Snohomish County Fire Districts #7 and #26. I acknowledge that no verbal or written promise or guarantee of any job or employment or membership is made or implied by my participating in this process.

I hereby consent to the taking of written examinations, hands on practical evaluations, and physical agility testing as scheduled during the academy. I understand that the written examinations will be scored on a numerical scale. I understand that the physical agility test is a pass or fail score.

If appropriate, I have notified Snohomish County Fire Districts #7 and #26 of any reasonable accommodation required for me to fully participate in such written and/or physical agility testing processes. I understand that the physical agility tests and the hands on practical evaluations are strenuous and hold the potential for serious injury. I acknowledge that I have willingly chosen to participate in these processes.

In addition, to being accepted by Snohomish County Fire Districts #7 and #26 to participate in the Firefighter Recruit Academy, I understand I may be required to submit to additional examinations, including but not limited to drug screening and/or medical examinations.

Accordingly, on behalf of myself and my estate, I hereby release and hold harmless, Snohomish County Fire Districts #7 and #26, and all their officers, agents, or employees to whom the test results will be applied or reported, from any and all cost, claim, liability, damage, or cause of action which may result from or out of this process, including but not limited to death, physical injury or monetary loss of any kind or nature.

I promise to hold harmless and indemnify Snohomish County Fire Districts #7 and #26 from any and all loss, claim, liability, damage, cause of action or cost of defense and/or liability arising out of this process, including the reasonable costs of defense by counsel of the entities choosing, PROVIDED HOWEVER, this release and promise to indemnify shall not be interpreted to require me to release and hold harmless or indemnify any party from the consequences of an intentionally tortuous act which shall arise from or out of such process.

I sign this waiver and release willingly and of my own volition. I understand that by signing this form, I give up all rights whatsoever to recover damages arising out of the East Snohomish Training Academy.

Signature

Date

Print Name



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PHOTO PERMISSION FORM

I, _____, hereby grant permission to Snohomish County Fire District 26 for the use of all photographs, or video taken of me during the East Snohomish Training Academy. These images may be used on the district website, program advertisements as long as they remain the property of the East Snohomish Training Academy and their affiliates. This permission is given without any compensation or remuneration.

Signatures _____ Date _____

Address _____

City _____ State _____ Zip Code _____ Phone _____

Signature of Witness _____ Date _____





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Snohomish County Fire District #26
PO Box 376
Gold Bar WA 98251

Report of Physical Examination for Membership

Name _____ Birthdate: ____/____/____
Address _____ How Long At This Address? _____
Occupation _____ Employer? _____ How Long? _____

MEDICAL EXAMINATION

History

Are you now in good health? YES / NO
Do you have or previously had any disabilities whereby your full physical capacities are limited? YES / NO
If so, explain _____

Have you ever had any of the following diseases or conditions?

Heart trouble	YES / NO	Rheumatism or Arthritis?	YES / NO
Kidney or urinary trouble?	YES / NO	Back trouble?	YES / NO
Tuberculosis or other lung disease	YES / NO	Allergies	YES / NO
Stomach ulcers/ intestinal disease	YES / NO	Asthma	YES / NO
Diabetes	YES / NO	Vision defects	YES / NO
Epilepsy	YES / NO	Hearing defects	YES / NO
Mental disease	YES / NO	Hernia	YES / NO
Nervous system trouble?	YES / NO	Piles	YES / NO

If so, explain _____
What serious illness, accidents, injuries, or operations have you had?

List any government, insurance compensations, or disability awards you have received. What for?

I hereby certify the above answers are full, complete, and true to the best of my knowledge:

Applicant to sign in presence of examining
M.D.





EAST SNOHOMISH TRAINING ACADEMY



To Be Filled Out by Physician

Physical Examination

Height _____ Weight _____ Pulse _____ Blood Pressure _____

General appearance _____

Vision uncorrected R _____ L _____ Corrected R _____ L _____

Head, Neck, Throat, Nose, Eyes, Ears: Findings: _____

Lung findings: _____

Heart: (a) Size _____ (b) Rhythm _____ (c) Murmurs _____

Abdomen: (a) Tenderness _____ (b) Masses _____

Inguinal Region: Right _____ Left _____

Spine: Motion _____ Curvature _____

Extremities: Limited motion or impaired function _____

Defects or deformities _____ Varicose Veins _____

Nervous System: Pupils _____ Knee jerks _____ Romberg _____

Tremors _____ Gait _____

Urinalysis: Albumin _____ Sugar _____

Physician Performing Exam _____ Date _____

Physician's Opinion:

Capable of sustained arduous duty ___ Capable of modified duty ___ Not qualified ___

Limitations _____

Remarks or Recommendations: _____

Physician Signature _____ Date ___/___/___

TO BE FILLED OUT BY FIRE CHIEF

I do hereby certify that _____ became an active member of this department on the _____ day of _____ year _____ and at that time, to the best of my knowledge and belief, was in sound health and physically capable of performing the duties of a firefighter.

Fire Chief or Designee Signature _____ Date ___/___/___

