

**CITY OF CRANSTON  
DEPARTMENT OF PERSONNEL  
ANNOUNCES AN OPEN COMPETITIVE CIVIL SERVICE EXAMINATION  
For  
FIREFIGHTER**

**Salary Range: Minimum: \$59,842.38**

**Maximum: \$67,278.64**

Applications may be downloaded from the City of Cranston's website [www.cranstonri.com](http://www.cranstonri.com) or obtained at no charge in person at Cranston City Hall, Room 107. Applications must be filed by **mail** on or before **4:30 PM, Tuesday, November 13, 2018** to City of Cranston Department of Personnel, 869 Park Avenue, Cranston RI 02910. **Time and place of the written examination, swim test and Cranston Ability Test to be announced by mail at a later date.**

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**DUTIES:**

Firefighters are primarily responsible for responding to fires, accidents and other incidents where risks are posed to life and property. The main duties of a firefighter are to protect the public in emergency situations. Firefighters respond to a wide variety of calls including motor vehicle accidents, chemical spills, flooding, water rescue, general rescue as well as fires. Duties include firefighting work in combating, extinguishing and preventing fires, maintaining firefighting equipment, apparatus and quarters and performing duties in the rescue division. Employees may be assigned to the following divisions: fire alarm, fire prevention, maintenance, rescue and training.

**EXAMINATION:**

**Firefighter Physical Performance Assessment** – Applicants are required to provide either an **April 2018 or September/October 2018** passing certificate from the **Rhode Island Association of Fire Chiefs** at [www.rifirechiefs.com](http://www.rifirechiefs.com) prior to the written examination.

The City of Cranston examination process shall consist of the following:

1. Job related written aptitude test. If you do not receive a passing grade **of 70** or above on the written aptitude test you will be eliminated from further participation this recruitment.
2. Swim test, aerial ladder climb and test for claustrophobia.

These tests will be scheduled by the city of Cranston for applicants who successfully complete the written aptitude test. These tests will be scored on a Pass/Fail basis.

All applicants passing all of these tests will be placed on the Civil Service eligibility list. Candidates will be placed on the eligibility register according to their final grade. This list will be used to fill all future vacancies according to Civil Service Rules and Regulations. The list will be active for a minimum of two years and may be extended for a third year with the approval of the Mayor.

As explained below, a **Rhode Island EMT-C (Cardiac)** license is required at the time of hire. If we reach you on the Civil Service list and you do not have this license you will not be hired and will be bypassed on the list.

**(3)** Candidates certified to fill vacancies must first pass a physical examination and Criminal background check.

**PREFERENCE:**

Honorably discharged active duty veterans who have received a passing grade on the written aptitude test shall have five (5) points added to their final grade and disabled active duty veterans shall have ten (10) points added to their final grade. In order to receive credit for veterans' preference, an honorably discharged active duty war veteran **must furnish DD 214 when filing application**. A disabled, active duty war veteran must submit proof that he/she has been classified as "disabled" by the Veterans' Administration. Applicant **must furnish DD 214** and proof of disability **when filing the application and must describe the disability**.

**VETERAN DATES** for active duty war veterans are as follows:

December 7, 1941 to December 31, 1946

June 27, 1950 to January 31, 1955

July 1, 1958 to January 1, 1959

August 5, 1964 to May 7, 1975

August 20, 1982 to December 31, 1987

December 20, 1989 to January 31, 1990

August 2, 1990 to May 1, 1994

September 18, 2001 – A period to be prescribed by law, an Act of Congress or Presidential Proclamation

October 16, 2002 – A Period to be prescribed by law, Act of Congress or Presidential Proclamation

**This definition shall be further defined as "any person who honorably served in the armed forces in any conflict or undeclared war for which a campaign ribbon or expeditionary medal was earned and who was honorably discharged from the service."**

*If you have been honorably discharged from active duty in Iraq, please submit a copy of the DD214, The City will determine if your status allows you Veterans points for your service.*

**QUALIFICATIONS TO APPLY:**

A United States citizen.

Must be a high school graduate (will accept a high school equivalency diploma).

**Age: Must be a minimum of 18 years of age by Tuesday, November 13, 2018.**

Weight: Proportionate to height.

Of good health, sound in mind and body.

Able to read, write and speak the English language. Mechanical aptitude desirable.

**Copy of high school or equivalency diploma must be submitted with application.**

**Copy of valid driver's license must be submitted with application.**

**TO BE APPOINTED:**

**A copy of a current Rhode Island EMT-C license must be submitted. EMT-C course information may be obtained by contacting the Rhode Island Department of Health at [www.health.state.ri.us/](http://www.health.state.ri.us/) or by telephone at 401-222-2231. You may apply if you have the Rhode Island EMT-B (Basic) license but you will not be hired if you do not have the cardiac license at the time of hire. You must submit a copy of the EMT-B license at the time of application if you are waiting for the cardiac certification.**

**A \$25.00 examination fee is required on the day of the written examination. Cash only will be accepted. Applicants must present a valid photo identification.**

Qualified applicants may be eligible to participate in the City of Cranston's revolving loan fund to obtain the emergency medical training certification required of all people interested in applying for the position of firefighter. Further information may be obtained at [www.cranstonri.com](http://www.cranstonri.com). **City Code Book, Title 2 Administration and Personnel, Chapter 2.24, Qualifications 2.24.030.**

Additional financial assistance for those seeking funding for the required certificates may inquire with Network RI, 1 Reservoir Avenue, Providence RI or at 401-462-8963. Further information may be obtained for those eligible at [www.employri.org](http://www.employri.org).



## 2018 FIREFIGHTER RECRUITMENT GENERAL INSTRUCTIONS

Please read the following instructions carefully.

Your application may be rejected if you do not submit the proper documentation by the application deadline.

- Applicant must download and print the entire application packet located on the Personnel drop down box at [www.cranstonri.com](http://www.cranstonri.com). If you are unable to, please call **401-780-3205** or **401-780-3207** and leave your name and mailing address and one will be sent to you.
- Please be sure to complete all of the documents in their entirety. Two (2) releases must be notarized. It is your responsibility to obtain the notary's signature. All requested documents and photocopies must be obtained by you and **mailed** prior to the application deadline. Applicants will not be allowed extra time to submit application documents and photocopies other than EMT- C (Cardiac) license. Incomplete applications will be rejected.
- The application deadline is **4:30 PM, Tuesday, November 13, 2018**. Your application must be postmarked no later than that date and time.
- All applications **must** be mailed. Please mail them to the **Department of Personnel, 869 Park Avenue, Cranston RI 02910**. Please do **not** send any applications to the Cranston Fire Department.
- You will need to submit an application, 2018 Rhode Island Association of Fire Chiefs Physical Performance Assessment (PPA); photocopies of your high school or college diploma and valid driver's license; two (2) releases and either a Rhode Island EMT-C or EMT-B license. You may submit any other relevant background information. **An EMT-B is not needed to apply.**

You may submit an EMT-B license to apply however an EMT-C (Cardiac) license is required to be hired. If we reach you on the civil service eligibility list and you do not have the cardiac license we will skip you and move on to the next candidate on the list. You will not be hired and given time to obtain the license.

- The website to obtain information for the Physical Performance Assessment is [www.rifirechiefs.com](http://www.rifirechiefs.com).
- There are no make-up dates for any of the City of Cranston exams. Failure to appear will result in automatic failure and elimination from the recruitment. Please be on time.
- There is a **\$25.00** examination fee for the written exam to be collected the day of the exam. Cash only will be accepted. We will not accept any bank or personal check and you will not be given time at the exam to obtain the money. **DO NOT MAIL THIS IN WITH YOUR APPLICATION**. Financial consideration will be given under certain circumstances.
- You will receive notice in the mail of all test dates and your final score and placement on the civil service eligibility list. Please do not call us requesting this information.
- It is your responsibility to notify us of any changes in your address and phone number. You need to call 401-780-3205 or 401-780-3207 to report any changes.
- Once the civil service eligibility list is established it will remain in effect for a period of two (2) years. It may be extended up to one year upon recommendation of the Director Personnel and approval by the Mayor.

**CRANSTON FIRE DEPARTMENT  
PHYSICAL ABILITY TEST  
AUGUST 2018**

**AERIAL LADDER CLIMB**

Climb a 75-foot aerial ladder set at an angle of 65 to 70 degrees.

Starting at the turntable, the candidate will climb one rung at a time, nonstop to the top rung, snap in\* and proceed back down the ladder to the turntable. A safety rope will be attached to each candidate.

\*This procedure will be explained at the time of the test.

**JOB RELATEDNESS:** Firefighters and rescue personnel are required to work in high places on many types of ladders and on rooftops. Although the technique of climbing ladders will be taught in training, an inherent fear of heights is detrimental to the safety of the rescuer and the victim.

**TEST FOR CLAUSTROPHOBIA**

The candidate, while wearing a darkened Self-contained Breathing Apparatus (SCBA) mask will be required to proceed, without lengthy delay, through a narrow dark passageway.

**JOB RELATEDNESS:** Firefighters are often required to work in limited, poor visibility areas in order to rescue victims or locate the source of the fire.

**SUGGESTION:** Knee pads or shin guards may be worn but **will not** be provided.

**SWIM TEST**

Candidates are required to swim 50 yards without stopping or touching the bottom of the pool. Candidates are not permitted to use any form of a backstroke while performing this test.

**Candidates unable to complete these events will be disqualified.**

**NOTE**

Each candidate must pass all portions of the physical ability test in order to complete the testing process. Each candidate will be required to sign a statement which releases the City of Cranston from any claim resulting from injuries or accidents sustained during the ability test. The sole responsibility for taking this test results with the candidate.



What source informed you of the Fire Recruitment?

Referral Agency \_\_\_\_\_  
Agency Name

Advertisement \_\_\_\_\_ AN EQUAL OPPORTUNITY EMPLOYER

Time:

**CITY OF CRANSTON  
DEPARTMENT OF PERSONNEL  
APPLICATION FOR EMPLOYMENT**

**FIRE DEPARTMENT  
RECRUITMENT 2018**

1. Name (Please print): \_\_\_\_\_

2. Current Address: \_\_\_\_\_  
Street City State Zip Code

3. Previous Address: \_\_\_\_\_

4. Telephone Number: \_\_\_\_\_ 5. Date of Birth \_\_\_\_\_

6. Do you have any physical disabilities, which would restrict you in the job applied for?  
Yes \_\_\_\_ No \_\_\_\_ If YES, please give details on separate piece of paper.

7. Are you a United States Citizen? \_\_\_\_\_

8. \*Military Service: \_\_\_\_\_ Entry Date: \_\_\_\_\_ Discharge Date: \_\_\_\_\_  
If disabled - Nature of disability \_\_\_\_\_ % of compensation granted by V.A \_\_\_\_\_

**\* Information required to determine veteran's points**

9. If a specific license is required, answer the following:  
Title: \_\_\_\_\_ Lic.No. \_\_\_\_\_ Date Issued: \_\_\_\_\_ Expiration: \_\_\_\_\_

\*\*\*\*\*

10. EDUCATION: Are you a high school graduate? \_\_\_\_ Yes \_\_\_\_ No  
If, NO, what was highest grade completed? \_\_\_\_\_

**COLLEGE, BUSINESS SCHOOL, SERVICE SCHOOL, TRADE SCHOOL AND OTHER EDUCATION**

Name of School	Years Completed	Dates Attended (Optional)	Major Subject	Degree or Certificate

11. EMPLOYMENT: Begin with your present or most recent employment. Report only the last ten (10) years.

Name and Address of Employer	Your Title	Dates Employed (From - To)	Reason for Leaving

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

12. Have you ever been employed by the City of Cranston? \_\_\_\_\_Yes \_\_\_\_\_No If your answer is "Yes" and such employment is not included above, please give pertinent data in the space provided below.

Department/Division \_\_\_\_\_ Position \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

\*\*\*\*\*

**PLEASE READ CAREFULLY**

**I hereby certify that all statements and answers given herein are complete and correct and I further understand that any misrepresentation on this application or upon discovery is reason for disqualification or dismissal if already employed.**

\_\_\_\_\_

**Date**

\_\_\_\_\_

**Signature of Applicant**

**DO NOT WRITE BELOW THIS LINE**

	<b>Noted By</b>	<b>Received By</b>
Veterans Discharge		
Veterans Disability Certificate		
Naturalization Certificate		
Driver's License		
High School Diploma/GED		
Birth Certificate		
Other Licenses or Certificates		



**CITY OF CRANSTON**  
**Department of Personnel**  
**869 Park Avenue**  
**Cranston RI 02910**

**EMPLOYMENT APPLICATION SUPPLEMENT-EEO INFORMATION FORM**

The information on this sheet regarding race, sex and age is needed for statistical purposes to meet federal reporting requirements on equal employment opportunity. This information is needed to analyze and assure compliance with city and federal Equal Employment Opportunity Laws. Your participation in this survey is voluntary and your replies will be kept confidential. This survey will be detached from your application form prior to review of qualifications and will be available only to authorized personnel for research and evaluation purposes.

**Applicant Name:** \_\_\_\_\_

**Position Applying for:** **FIREFIGHTER** **EXAM NUMBER** **1298**

**Sex:**     **Male**                     **Female**

**Age:**      **Under 20**            **20-39**            **40-65**            **66 and over**

**ETHNIC BACKGROUND**

**Please review all categories listed below. Determine the category which you believe best represents your ethnic background. Check one category only.**

- White (not of Hispanic origin):** All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- Black (not of Hispanic origin):** All persons having origins in any of the Black racial groups of Africa.
- Hispanic:** All persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
- Asian or Pacific Islander:** All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Sub-continent or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands and Samoa.
- American Indian or Alaskan Native:** All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.



**Cranston Fire Department  
301 Pontiac Avenue  
Cranston, Rhode Island 02910**

Date: \_\_\_\_\_

To Whom It May Concern:

I, \_\_\_\_\_ D.O.B. \_\_\_\_\_ of

\_\_\_\_\_  
Address

have made application for appointment to the Cranston Fire Department for the position of Firefighter. I agree to allow the Cranston Police Department, the Cranston Fire Department and the City of Cranston the opportunity to conduct a complete and proper background check. I do hereby authorize the Chief of the Cranston Fire Department or his agent to examine any and all medical records, school records, pre-employment records, court records, criminal records, police records and any and all records pertaining to myself. I also agree to undergo a pre-employment occupational ability medical examination which will be paid for by the City of Cranston. I agree to the examination and allow the Cranston Fire Department and the City of Cranston to review the medical results of said examination and any and all medical records regarding any physical condition that I may have or have had that will affect my ability to serve as a Firefighter.

\_\_\_\_\_  
Signature

Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 2018

Notary Public \_\_\_\_\_

Commission Number \_\_\_\_\_

Commission Expiration Date \_\_\_\_\_



**Cranston Fire Department  
301 Pontiac Avenue  
Cranston Rhode Island 02910**

DATE \_\_\_\_\_

I, \_\_\_\_\_, D.O.B. \_\_\_\_\_

of \_\_\_\_\_, do hereby release and forever  
ADDRESS

discharge the City of Cranston, its agents and servants, including all members of the Cranston Fire Department, their heirs and executors and administrators from all claims, demands, actions and causes of actions, both in law and equity or especially all claims of any physical or mental injury or discomfort or accidental death arising out of participating in, taking part in, and being allowed to take the Cranston Fire Department ability test. It is completely understood that I am taking the above mentioned action of my own free will.

\_\_\_\_\_  
Signature

Sworn and subscribed before this \_\_\_\_\_ day of \_\_\_\_\_ 2018

In \_\_\_\_\_

Notary Public \_\_\_\_\_

Commission Number \_\_\_\_\_

Commission Expiration Date \_\_\_\_\_