



Affton Fire Protection District

To: All applicants

Thank you for your interest in applying for a Firefighter/Paramedic position with the Affton Fire Protection District. **Please include the following with your application:** Resume, signed waiver for the district to conduct a Missouri State Highway Patrol Criminal Records and Driving Records Review, copies of your EMT-P License, ACLS, PALS, or PACTS, PHTLS or BTLS or ITLS Provider Cards, Driver's License, St. Louis County Fire Academy Certificate, Firefighter I and II certificates plus Hazardous Materials Awareness and Operations Certificates from the State of Missouri Division of Fire Safety, valid Candidate Physical Ability Test (CPAT) card, and any other certificates or licensures you would like to attach for consideration. If you do not include all previous mentioned items, you will not be eligible to participate in the hiring process.

Minimum requirements for the position are twenty-one (21) years of age, current Missouri EMT-P License, current ACLS, PALS and PHTLS or its equivalent, graduate of the St. Louis County Fire Academy and Missouri State Certification in Firefighter 1 & 2, Hazardous Materials Awareness and Operations, a valid Candidate Physical Ability Test (CPAT), and a current State Driver's License.

All applicants that meet the minimum requirements will be contacted to participate in the testing process when deemed necessary, assuming they have turned in the required previous mentioned information. Applicant testing shall consist of a Paramedic Written Examination.

If you require further information, please feel free to contact the administrative offices during normal business hours.

Thank you,

A handwritten signature in blue ink, appearing to read "Nickolas Fahs", with a long horizontal flourish extending to the right.

Nickolas Fahs
Fire Chief



AFFTON FIRE PROTECTION DISTRICT

Emergency Medical and Fire Protection Services

Firefighter/Paramedic Hiring Notice

The Affton Fire Protection District is seeking qualified candidates for the position of Firefighter/Paramedic.

Intentions: The district will be accepting applications for the purpose of filling a current vacancy.

Minimum Qualifications:

- Twenty-one (21) years of age
- High school diploma or equivalent
- Valid driver's License
- Valid Missouri Paramedic License
- Graduate of the St. Louis County Fire Academy
(Candidates currently enrolled in class 125 may apply)
- Missouri state certified Firefighter I and II
- Valid Candidate Physical Ability Test (CPAT) card
- ACLS, PALS or PACTS, PHTLS or BTLS or ITLS, must be certified prior to employment.

How to Apply

Application packets are available at the Administrative Offices of the Affton Fire Protection District located at 9282 Gravois Road during the hours of 9am to 3pm Monday – Friday from May 1, 2025, through May 23, 2025. Applications may also be obtained online at (www.afftonfire.com). All applications MUST be returned in person at the Administration office by May 23, 2025, before 3pm.

Testing and Employment Process

The Firefighter/Paramedic Testing Process is conducted when a current or expected vacancy exists. Applicant testing shall consist of a Paramedic Written Examination.

The Affton Fire Protection District is an Equal Opportunity Employer

9282 Gravois Road
St. Louis, Missouri 63123

Office: 314.631.1803
Fax: 314.631.3569



Affton Fire Protection District

DRIVER'S AND CRIMINAL RECORDS CHECK RELEASE

This is to notify you that at some part of the evaluation for possible future employment with the Affton Fire Protection District we will be submitting your name and other pertinent information to the Authorities so that a Driver's and Criminal Records Background check can be performed. The outcome of this background check may or may not affect your eligibility for employment at the Affton Fire Protection District.

Any and all information obtained through this background check will be held in the strictest confidence by this Department and will not be released to anyone outside of the hiring officials.

By signing this release you are authorizing the Affton Fire Protection District to perform a Driver's and Criminal Records Background Check with full knowledge that it may or may not affect your possible employment with us.

Printed Name

Date

Signature

Application for Employment

PRE-EMPLOYMENT QUESTIONNAIRE EQUAL OPPORTUNITY EMPLOYER

Personal Information

DATE _____

NAME (LAST NAME FIRST)		SOCIAL SECURITY NO.	
PRESENT ADDRESS	CITY	STATE	ZIP CODE
PERMANENT ADDRESS	CITY	STATE	ZIP CODE
PHONE NO.	SECONDARY PHONE NO.	REFERRED BY	

Employment Desired

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	
EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE	WHEN

Education History

	NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS, OR CORRESPONDENCE SCHOOL				

General Information

SUBJECT OF SPECIAL STUDY/RESEARCH WORK	
SPECIAL TRAINING	
SPECIAL SKILLS	
U.S. MILITARY OR NAVAL SERVICE	RANK

Former Employers (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)

DATE MONTH AND YEAR	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

References (GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.)

NAME	ADDRESS	BUSINESS	YEARS KNOWN

Authorization

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

I understand that a consumer credit report or criminal records check may be necessary prior to my employment. If such reports are required, I understand that, in compliance with federal law, the company will provide me with a written notice regarding the use of these reports and will also obtain a separate written authorization from me to consent to these reports. I also understand that a poor credit history or conviction will not automatically result in disqualification from employment."

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

DATE

SIGNATURE

Do Not Write Below This Line

DATE

INTERVIEWED BY

Remarks

NEATNESS		CHARACTER		
PERSONALITY		ABILITY		
HIRED	FOR DEPT.	POSITION	WILL REPORT	SALARY WAGES

APPROVED:

EMPLOYMENT MANAGER

DEPARTMENT HEAD

GENERAL MANAGER

This application for employment is sold only for general use throughout the United States. TOPS assumes no responsibility and hereby disclaims any liability for the inclusion in this form of any questions or requests for information upon which a violation of local, state, and/or federal law may be based. It is the user's responsibility to ensure that this form's use complies with applicable laws, which change from time to time.