



Boca Grande Fire Control District

P.O. Box 532 360 East Railroad Ave.
Boca Grande, Florida 33921
(941) 964-2908

We are pleased that you are considering applying for employment with the Boca Grande Fire Control District. This is the first step in starting a positive and lasting relationship with the district and all the professionals we employ. Our employees are committed to serving this community with pride and dedication. The district is committed to employing the best and brightest professionals in the area.

The district covers a land mass that is approximately 7 miles long, ½ mile wide, 3½ square miles in total, and includes the area waters surrounding the island. We operate with a variety of Apparatus to cover the land mass while utilizing a Marine Division to respond to emergencies in the waters surrounding our District. The Gasparilla Island Water Association provides a well-established water supply system to aid in fire suppression efforts.

Along with our fire protection responsibilities, we are also an ALS non-transport Department. We work closely with Lee County EMS, who is our primary ALS transport provider, to provide EMS back-up for medical emergencies. When LCEMS is unavailable, our department provides ALS services until additional ALS transport can be provided.

The district responds to various types of emergencies, both in our jurisdiction, and with our neighboring departments outside our District. When we are not mitigating emergencies, we strive to provide high quality public education through fire prevention programs and CPR/First Aid classes, both at our station, and on location at the businesses and schools we protect. We are also deeply involved in community related activities and engage the public whenever possible. Community involvement and interaction is a top priority of the district and its employees because it leaves a lasting and positive impression for everyone.

We offer competitive base pay starting at \$56,275 for firefighters plus an additional \$4,000 for EMT or \$13,500 for Paramedic. The district also pays \$2,500 per year for having an associate degree, or \$5,000 for a bachelor's degree. We also have department-wide monthly and yearly training goals and objectives in which each employee actively participates so nobody becomes stagnant with their skills.

The position we are hiring for is that of a Firefighter/Paramedic. Firefighter/EMTs may apply with the understanding that they will be required to take and pass Paramedic School at the discretion of the district. As with all education, the district will pay for you to attend Paramedic School.

If you feel that you want to be part of the Boca Grande Fire Department team and are willing to make a long term commitment to better yourself and this unique community, please visit our website, www.bocagrandefire.com to download our application. Please follow the instructions and return your completed application no later than **4:00 PM on Monday, February 9, 2026**. You can return it by US Mail (to PO Box 532), email to admin@bocagrandefire.com (**must request read receipt to show proof of receipt by BGFD**), or hand deliver to the Office of the Fire Chief at Boca Grande Fire Department.

Respectfully,

A handwritten signature in black ink, appearing to read "C. Blosser".

C.W. Blosser, Fire Chief



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INSTRUCTIONS FOR COMPLETING EMPLOYMENT APPLICATION FORM

1. Your application is the first step in the process of obtaining employment with the Boca Grande Fire Control District. **PLEASE READ ALL INSTRUCTIONS CAREFULLY AND COMPLETE ALL STATEMENTS TO THE BEST OF YOUR KNOWLEDGE.** Falsification of information may result in rejection of the application or dismissal if you are employed by the Boca Grande Fire Control District (BGFCD).
2. Please PRINT in **BLACK** ink. Blue ink or pencil is not acceptable. If an item does not apply to you, write in the letters "NA" or Not Applicable.
3. PERSONAL DATA:
 - Double check copies of Social Security Card and Certificates for correctness & clarity in printing numbers.
 - IF HIRED, YOU WILL BE REQUIRED TO FURNISH A VALID SOCIAL SECURITY CARD, PROOF OF IDENTITY, WORK AUTHORIZATION, FLORIDA DRIVERS LICENSE, FLORIDA STATE FIRE AND FLORIDA STATE PARAMEDIC CERTIFICATIONS.
 - If you do not have a phone, you must provide a phone number where you may be reached and/or a message taken.
 - If you change your address or telephone number, please notify the Fire Chief immediately.
4. POSITION DATA:

The position applied for should correspond with your experience, training and education.
5. EDUCATION DATA:
 - Circle highest grade of school completed.
 - Give dates of attendance, credit hours, type of degree, major/minor.
 - List all technical and/or trade courses or programs you have attended.
 - Certain positions require that you produce evidence of licenses, certifications, or educational attainment.
6. EMPLOYMENT RECORD:
 - List all employment and salary history.
 - Account for any gaps between employments.
 - Give the complete address, telephone number of previous employer and name of immediate supervisor to all jobs listed.
7. **Please make 3 copies of pages 9 & 10 to give to your 3 references and have the references send the completed forms to Boca Grande Fire Department, PO Box 532, Boca Grande, FL 33921. Attention: Application Reference.**
8. You are required to sign and date your application. All statements should be complete and accurate to the best of your knowledge and are subject to verification. An incomplete application, or any falsification of information may result in rejection of the application or dismissal if you are employed by BGFCD. This information will be kept active for 2 years from the date submitted. After the 2-year period has expired, applicants are required to complete a new application.



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HIRING PROCESS FOR FIREFIGHTER

The Boca Grande Fire Control District will be accepting applications for Firefighter/Paramedic starting **12/22/2025**. Applicants must possess a valid Certificate of Compliance for Firefighter in the State of Florida, a valid EMT/Paramedic Certification for the State of Florida plus a valid Florida State Driver's License. If hired, you will also be required to take and pass a Physical Examination, a urinalysis and blood test, and submit to a background check. The Boca Grande Fire Control District is a drug free workplace.

- Applicants will have to take a written exam consisting of Fire & Paramedic questions from Jones and Bartlett 5th edition; Emergency Care and Transportation of the Sick and Injured 12th Edition; and Paramedic questions will come from the American Heart Association 2020 ACLS book.
- Applicants will have to take and pass a physical agility and practical evaluation.
- Upon successfully completing these portions of the evaluation, the top 10 candidates will be invited to participate in an oral review board which is comprised of members from the Boca Grande Fire Control District.

Projected hire date shall be March 1st, 2026.

The grading process shall be as follows:

25% Written Exam
25% Agility Evaluation
25% Skills Assessment
25% Oral Interview

Applications may be picked up in the Office of the Fire Chief at 360 East Railroad Avenue, Boca Grande, printed from our website bocagrandefire.com, or requested by email at admin@bocagrandefire.com.

The starting salary will be \$56,275 plus an additional \$4,000 for EMT or \$13,500.00 for Paramedic Incentive (if applicable).

APPLICATIONS, INCLUDING ALL DOCUMENTS AND REFERRALS, ARE REQUIRED TO BE IN THE OFFICE OF THE FIRE CHIEF BY 4:00 PM, Monday, February 9th, 2026. ANY DOCUMENTS RECEIVED AFTER THIS DATE WILL RESULT IN REJECTION OF THE APPLICATION.



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INSTRUCTIONS FOR ASSEMBLING YOUR DOCUMENTS

The application packet must be completed and returned prior to the candidate being eligible for the application process to begin. Along with the application-required paperwork, the candidate must also provide one (1) copy of each of the following documents:

1. Photocopy of your Driver's License
2. Photocopy of your Social Security Card
3. Photocopy of your High School Diploma or GED scores.
4. College transcripts, if any, are in a sealed envelope from the school registrar.
5. Photocopy of your Birth Certificate.
6. Photocopy of DD-214 or other military record, if any.
7. Photocopy of your Florida State Minimum Standards Fire Certificate.
8. Photocopy of your Florida State EMS Certificate and Paramedic Certificate.
9. Photocopy of any fire related certificate you may possess.

Please follow these directions when assembling your documents.

- Please assemble your documents in the order listed above.
- **DO NOT STAPLE, BEND, or BIND** your personal materials in notebooks, sheet covers or other materials.
- Make sure your name is written clearly on each page.
- All pages must be standard 8.5" x 11" and paper clipped together.
- If you cannot get a copy of your High School Diploma, you may submit a copy of your transcript, which indicates a date of graduation.
- Please print in **black ink** or type out answers. Blue ink and pencil is not acceptable. If an item does not apply to you, write in the letters "**NA**" or **Not Applicable**.

Please return your application via US mail to PO Box 532, Boca Grande, FL 33921, or email to admin@bocagrandefire.com (must request read receipt to show proof of receipt by BGFD), or in person to the Chief's Office at the Boca Grande Fire Department by **4:00 PM, Monday, February 9th, 2026.**



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EMPLOYMENT APPLICATION

Date of Application: _____ Position: Fire Fighter/Paramedic

Name: (First, Middle, Last) _____

Is any additional information related to a different name necessary for us to check your work record (alias)?

☐ YES ☐ NO (If yes, please list) _____

Street Address: _____

City, ST, Zip: _____ How Long? _____

Mailing Address (if different): _____

City, ST, Zip: _____

Home Phone: (____) _____ SS #: _____

Cell Phone: (____) _____ e-mail: _____

Are you 18 years of age or older? ☐ YES ☐ NO

EDUCATION

Circle highest grade completed: 12 13 14 15 16 16+

High School: _____ City, State: _____

Trade School: _____ City/State: _____ Dates: _____

College: _____ City/State: _____ Dates: _____

Other: _____ City/State: _____ Dates: _____

Military Service: ☐ YES ☐ NO Branch: _____ Dates: _____

Please list any other training or experience: _____

How long have you been a resident of Florida? _____

Can you provide proof of legal authorization to work in the United States

YES NO
☐ ☐

Have you ever been convicted of a felony or are there any felony charges pending against you? (If yes, please describe below.)

☐ ☐

INCIDENT

CITY/STATE

CHARGE

_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYMENT HISTORY (*Start with most recent employer*)Are you currently working for this employer? ☐ **YES** ☐ **NO**If yes, may we contact them? ☐ **YES** ☐ **NO**

1) _____
Company Name City State Phone

Dates Employed Job title Supervisor Name

Duties and Responsibilities

Salary Per (Hour, Week, Mo) Reason for leaving

2) _____
Company Name City State Phone

Dates Employed Job title Supervisor Name

Duties and Responsibilities

Salary Per (Hour, Week, Mo) Reason for leaving

3) _____
Company Name City State Phone

Dates Employed Job title Supervisor Name

Duties and Responsibilities

Salary Per (Hour, Week, Mo) Reason for leaving

REFERENCES: List 3 – include only people familiar with your work ability and who are not related to you.

Name	Address / Phone	Yrs Known/ Relationship
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____

I verify that the statements I have made in this application are true and complete. I understand that if I am hired, any false or incomplete statements in this application may be grounds for discharge.

Signature: _____ Date: _____



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APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above application are true and complete to the best of my knowledge. I authorize the Boca Grande Fire Control District and its officers to verify the accuracy, and to obtain reference information by contacting educational institutions, references or employers, and to rely on and use such information as they see fit. Boca Grande Fire Control District has my authorization to thoroughly investigate my work, medical and personal history that is job-related. I will hold no person, corporation, or organization liable for giving or receiving information in this investigation. The application and all information obtained is the property of the Boca Grande Fire Control District.

I understand that, if granted employment, falsified statements of any kind, or omissions of facts called for in this application, regardless of time of discovery, shall be considered sufficient basis for dismissal.

I understand that all medical information I have submitted is confidential. I hereby agree to allow the Boca Grande Fire Control District to review this information for hiring, interviewing, and employment purposes. I understand that should an offer of employment be offered to me, and accepted, that I fully adhere to the policies, rules, SOP's and regulations of the department.

Printed name of Applicant: _____

Signature of Applicant: _____ Date: _____

THIS FORM MUST BE NOTARIZED

STATE OF FLORIDA

COUNTY OF _____

On _____ personally
(Month, Day, Year) (Applicant's Name)

appeared before me and, ☐ who is personally known to me, or ☐ has provided _____
as identification. (Type of ID)

Notary Public Signature

Commission expires: _____



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ANNUAL MEDICAL STATEMENT OF PERSONNEL

This form is designed to provide the Fire Chief with a history of your physical status as of the date indicated without the need for expensive physical examinations. It is recommended that the form be completed on an annual basis by all drivers of emergency vehicles as well as other employees.

NOTE: If any of the questions are answered "YES", please give particulars below. For medical history, underline the item and identify by referring to question number and letter. Give dates, symptoms, duration, treatment results, names and addresses of doctors, hospitals, etc.

All the information provided will be kept confidential and will be utilized by the Boca Grande Fire Control District for employment purposes only.

Name:		
Address:		
City:	State:	Zip:
Full Time Occupation:	Name of Organization:	
Position/Title:		
Social Security Number:		

1.	Birth Date	Month:	Day:	Year:		
2.	Eyesight				YES	NO
	a.	Have you lost use of either eye? <input type="checkbox"/> Right <input type="checkbox"/> Left			<input type="checkbox"/>	<input type="checkbox"/>
	b.	Is peripheral (side) vision restricted?			<input type="checkbox"/>	<input type="checkbox"/>
	c.	Are you color blind?			<input type="checkbox"/>	<input type="checkbox"/>
	d.	Do you have, or have you ever had cataracts?			<input type="checkbox"/>	<input type="checkbox"/>
	e.	Are actual deficiencies corrected by glasses or contact lenses?			<input type="checkbox"/>	<input type="checkbox"/>
	f.	Date of last eye examination:				
3.	Hearing					
	a.	Do you have difficulty hearing normal conversation level?			<input type="checkbox"/>	<input type="checkbox"/>
	b.	Do you use a hearing aid?			<input type="checkbox"/>	<input type="checkbox"/>
4.	Diabetes					
	a.	Have you ever been treated for diabetes?			<input type="checkbox"/>	<input type="checkbox"/>
	b.	Describe current medication and dosage, if any, and method of administration under "remarks"				
	c.	Date of latest blood sugar test:				
5.	Heart					
	a.	Have you ever been treated for heart disease?			<input type="checkbox"/>	<input type="checkbox"/>
	b.	Describe condition:				
	c.	Describe current medication and dosage, if any, under "remarks".				
	d.	Do you have a pacemaker			<input type="checkbox"/>	<input type="checkbox"/>
	e.	Date of last treatment or checkup:				
6.	Epilepsy					
	a.	Have you ever been treated for epilepsy?			<input type="checkbox"/>	<input type="checkbox"/>
	b.	If "yes" when was your last seizure?				
	c.	Describe current medication and dosage, if any, under "remarks"				

REMARKS: _____



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APPLICATION REFERENCE FOR: _____
(Print Applicant's Full Name)

INTRODUCTION: The above-named applicant has applied for employment with the Boca Grande Fire Control District. Members must be reliable, trustworthy, possess impeccable moral character, and be able to function as part of a team. They must be able to work "within the command structure of the organization under stressful and sometimes hazardous conditions".

YOU ARE NOT REQUIRED TO BE A REFERENCE. If you choose to act as a reference, the information you provide may be relied upon by the district, its Officers, and its Board of Commissioners in deciding on the prospective member's application. **Your full and candid response is appreciated. This form should be returned directly to the Boca Grande Fire Control District by reference.**

TO THE APPLICANT: Please complete Part I of this form and then give it to someone who knows you well and can provide an accurate and full account of your abilities, accomplishments, and personal qualities. Please provide the recommender with this form and a stamped envelope addressed to: **Boca Grande Fire Department, PO Box 532, Boca Grande, FL 33921. Attention Application Reference.**

PART I (to be completed by applicant)

NAME: _____
Last First Middle

Permanent Home Address: _____
(Number and Street)

City: _____ **State:** _____ **ZIP:** _____

I hereby authorize the below reference to provide the requested background and personal information to the Boca Grande Fire Dept, its Officers, and its Board of Commissioners. I acknowledge that this completed reference is the property of the Boca Grande Fire Department and I have no right to see the completed reference or any other part of my application or employment file.

Applicant's Signature

Date

PART II (to be completed by reference)

Name: _____ **Occupation:** _____
Last First Middle

Address: _____
(Number and Street)

City: _____ **State:** _____ **ZIP:** _____

How long and in what capacity have you known the applicant? _____

How frequently do you have contact with the applicant? _____

Do you know other people who are acquainted with the applicant? _____



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PART II Continued *(to be completed by reference)*

Please complete these ratings, bearing in mind that they are used to compare this applicant to other highly capable applicants.

Unable to Judge		Below Average	Average	Good (Top 10%)	Outstanding (Top 3%)	One of the Best Encountered in My Career
	Integrity					
	Intellectual Curiosity					
	Motivation/Initiative					
	Self-Confidence					
	Community Respect					
	Warmth of Personality					
	Leadership					
	Reliability					
	Trustworthiness					
	Interpersonal Skills					
	Ability to Maintain Confidential Information					
	Ability to Maintain Calm under Stress					
	Reaction to Criticism					

Do you wish to elaborate on any of these ratings? _____

Please offer any additional comments concerning this applicant's ability, character, and suitability for membership in the Boca Grande Fire Department. (For example, alcohol or drug concerns, psychological instability concerns, incidents of violence or aggression towards coworkers, supervisors, family, etc.) We will be pleased to receive an attached letter if you wish. We sincerely appreciate your assistance.



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IMPORTANT DATES

Written Examination

Date: **February 17th, 2026**
Time: **0900 hours** – *Doors will be locked @ 0900 hrs. & no admission after doors close*
Location: **Englewood Fire Academy**
13400 Haligan Way
Englewood, FL 34223
Requirements: Must pass the Written Examination with a minimum of 75% correct.

Physical Performance Assessment:

Date: **February 17th, 2026**
Time: Immediately following the completion and passing of written examination
Location: **Englewood Fire Academy**
13400 Haligan Way
Englewood, FL 34223
Requirements: Must pass the Physical Performance Assessment in the prescribed time to take the Practical Assessment.

Practical Assessment:

Date: **February 17th, 2026**
Time: Immediately following Physical Performance Assessment
Location: **Englewood Fire Academy**
Requirements: Must pass the Practical Assessment to be eligible for the Oral Review Board

Oral Board:

Date: **Week of February 23rd, 2026.** You will be notified of the exact date.
Time: After the Practical Assessment you will be given time for your Oral Review Board if you are within the top 10.
Location: **Boca Grande Fire Department**
360 E. Railroad Ave
Boca Grande, FL 33921

Projected Starting Date: **March 01, 2026**

APPLICATION DEADLINE IS 4:00 PM, Monday, February 9th, 2026.

APPLICATION, ALL NECESSARY DOCUMENTS AND REFERENCE SHEETS MUST BE TURNED INTO THE OFFICE OF THE FIRE CHIEF LOCATED AT:

360 East Railroad Ave, Boca Grande, FL 33921

or mailed to: PO Box 532, Boca Grande, FL 33921

or emailed to: admin@bocagrandefire.com **must request read receipt to show proof of BGFD receipt*



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APPLICATION and TESTING STEPS

Please follow all instructions and directions noted herein and return your completed application, including all documents and referrals, to the Fire Chief by the deadline date listed. Any application, and/or documents completed incorrectly and/or received after the deadline will result in rejection of the application.

You will be notified if your application is accepted for you to begin the testing process.

The Boca Grande Fire Control District's testing process

1. Fire Standards written examination.
2. EMS or ALS written examination.
3. Physical Performance Assessment (See Physical Assessment description for test procedures)
4. Practical Exam - The candidate must complete the following task:
 - a. HAZMAT - ERG Manual
 - b. Hydrant Skills Assessment
 - c. Fire Ground Operations – Ropes & Knots Assessment
 - d. EMS Assessment

All 4 testing categories will be graded and only the top 10 candidates will be asked to participate in the Oral interviews.

5. The candidate must complete an oral assessment, where the candidate will be asked a series of questions by a panel and will be graded upon how well you respond.



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INDEMNITY AND HOLD HARMLESS AGREEMENT

I, _____ have asked the Boca Grande Fire Control District
(Print Name)
to allow me to participate in the Pre-Employment Physical Agility Assessment and Practical Assessment.

I understand that my participation in this activity may expose me to danger and possible injury and I hereby agree to assume all such risks.

In consideration of being permitted to participate in the above-described activity, I, on behalf of myself, my heirs, and my personal representative, hereby release and discharge the Boca Grande Fire Control District and Englewood Area Fire Control District and their agents, officers and employees from any and all claims, damages, liabilities and losses resulting from or arising out of my participation in the above-described activity.

I have read this release and understand all its terms. I execute this release voluntarily and with full knowledge of its significance.

Dated this _____ day of _____, 20_____.

(Participant Signature)

(Witness Signature)

Activity authorized by the Boca Grande Fire Control District.

C. W. Blosser, Fire Chief



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Medical Approval for the Boca Grande Fire Control District Candidate **Physical Agility Assessment**

Applicants will **NOT** be permitted to take the Physical Agility Assessment without this form signed by their physician.

I have examined _____ and found him/her to be medically competent to perform the Boca Grande Fire Control District Physical Agility Assessment.

Doctor's Name _____ Telephone: _____

Doctor's Signature _____ Date: _____

Assessment Description

The physical agility assessment consists of five events designed to simulate some of the more physically demanding tasks of the firefighter. The Performance Assessment is performed to ensure that firefighters have the skills, physical strength, agility, endurance, and mental alertness required to be able to perform as a firefighter. Applicants may experience extreme fatigue, elevated heart rate and blood pressure, and difficulty in breathing. The assessment shall be conducted while wearing a coat, helmet, gloves, and a Scott SCBA which will be furnished by the department. You may wear your own NFPA approved turnout equipment if you have it. We strongly suggest that the applicants begin preparation for the assessment in the form of walking, jogging, bicycling, etc.

The assessment shall consist of the following evolutions:

Task #1 Forcible Entry

The firefighter will proceed to the Keiser Force Machine. The forcible entry evolution utilizes the Keiser Force Machine™ (a chopping simulator). Using the 8 lb. shot mallet the firefighter must drive the steel beam a horizontal distance of 5 ft. Pushing, raking, or hooking the beam is not an acceptable method. It must be struck only by the head of the mallet. The handle must not encounter the beam at any time. Both hands should be above the tape mark on the handle (12 in. from the head end) at the point of impact. The evolution starts when the firefighter grabs the hammer and ends when the sled has been successfully moved five (5) feet. Proceed to the next station without stopping.



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Medical Approval for the Boca Grande Fire Control District Candidate **Physical Agility Assessment - Test Description** *cont.*

Task #2 Hose Pull

After walking approximately 140 ft., from the Keiser Force Machine to the charged 1¾" line the firefighter must pick up the nozzle end of the charged hose line, and advance it to a distance of 75 ft. Once the nozzle reaches the 75-ft. line, the firefighter shall open the nozzle to show water and then shut down the nozzle and place **(not drop or throw)** the nozzle on the pavement. Proceed to the next station without stopping.

Task #3 Ladder Raise

Properly raise and extend 24' ladder to full extension. Proceed to the next station without stopping.

Task #4 High Rise Pack Carry

Carry a high-rise pack (100' of 1 3/4" hose) to the top of the drill tower and back down to the bottom. The hose pack may be shouldered, and the free hand used to assist in the stair climb. Time ends when you exit the tower.

Task # 5 Dummy Drag

The candidate simulates removing a victim from a hazardous environment by lifting or dragging a dummy (165 lbs. dummy plus protective clothing – totaling no more than 185 lbs.) for a total of 75 feet. The candidate may lift the dummy under the armpits or drag using turnout gear.

The Performance Assessment is to be completed in a sequential manner with a maximum time of less than 8 minutes. Each evolution should be completed without stopping.

Each evolution/task must be satisfactorily completed. The applicant will have a maximum of three attempts per evolution during the assessment.

A Fire-medical will be at the assessment for medical support. The Fire-medical will document each applicant performing the assessment for pulse and blood pressure for both a baseline reading ten minutes prior to the assessment, and another set of readings within 5 minutes immediately after the assessment. Applicants with a diastolic reading of over 100 mmHg, an irregular pulse, or a pulse rate of over 120 beats per minute prior to the assessment should not be permitted to take the assessment until after a physician's approval. Irregularities in behavior or vital signs taken after the assessment due to the physical exertion of the event shall be forwarded to the Fire Chief.