



IOS Recruitment and Testing Services
Berwyn Fire Department
Entry Level Firefighter Application Instructions

Be a Part of Our “Great Tradition”

Thank you for your interest in Berwyn Fire Department!

Please be sure to carefully review all application instructions and testing information.

Firefighter Application Instructions:

1. Carefully review the minimum requirements on the following page. All requirements must be met by the specified deadline, **May 6, 2022, at 2:00 p.m.** Documents delivered after the application deadline will not be accepted. Applicants who do not meet the minimum requirements by the application deadline will not be allowed to continue in the testing process.
2. Visit iosolutions.com to complete the online application. When you have finished the online application, you will receive a confirmation number- save this number for your records.
3. In addition to the online application, applicants must mail/ship or hand deliver the release form and required documents. Documentation sent via **email will NOT be accepted.**

For MAIL/HAND-DELIVERY – Gather all required documents, release form(s), and place all documents into an envelope. Mail/ship the envelope via a traceable carrier (FedEx, UPS, etc.) or hand-deliver to:

**IOS Recruitment
ATTN: Berwyn FD
1520 Kensington Road, Suite 110
Oakbrook, IL 60523**

4. Please contact IOS Recruitment at (800)-343-HIRE or recruitment@iosolutions.com with questions regarding the application and/or required documents before the application deadline date. Please be aware that our business hours are M- Th 8:30 a.m. – 5:00 p.m.; Fri- 8:30 a.m. – 3:00 p.m.; closed weekends and holidays. Applications are only available through IOS.

Please do not contact the City of Berwyn or the Fire Department regarding the application, requirements or the test. They will not have any information regarding the exam.

Orientation and Testing Information:

Candidates must attend the mandatory orientation and written examination on **June 4, 2022**. Testing location and sign-in times will be provided to eligible candidates.

Interviews are tentatively scheduled for **June 23rd and 24th 2022**.

All portions of the testing process are mandatory. Failure to attend and successfully complete any portion of the process will result in elimination from employment consideration.





IOS Recruitment and Testing Services

Berwyn Fire Department

Entry Level Firefighter Application Instructions

Application Deadline:
May 6th, 2022, at 2:00 p.m.

Firefighter Minimum Requirements:

- \$0 application fee
- Able to work in the United States
- Valid Driver's License (Must have a valid Illinois Driver's license at time of Conditional Offer of Employment (COE) and maintain the license during the course of employment with the City of Berwyn)
- 21 to under 35 years of age at the time of written exam
- Certified Illinois Department of Public Health Paramedic at time of conditional offer of employment
- Able to gain approval into Loyola Hospital EMS System upon employment at time of conditional offer of employment
- Must be an Illinois Certified Firefighter II/Basic Operations Firefighter with the Illinois Office of the State Fire Marshal at time of conditional offer of employment
- Must have a valid CPAT **AND** Ladder Climb Certification
- Must be able to read, write and speak English
- Must be a resident of Cook, DuPage, Lake, Kane, McHenry, or Will County, Illinois. As a condition of employment, all Fire Department personnel must reside in the counties listed by the end of the probationary period and during the course of employment
- Completion and submission of online application and all required documents by 2:00 p.m. CST on May 6, 2022, at 2:00 p.m.

Preference Points:

- Military Veteran Status (5 points)

Starting Salary: \$74,215.53

- Increases for Longevity and Education
- Education Assistance (within the fire service)
- Excellent Health, Dental & Vision Insurance
- Excellent Pension Benefit
- Employer-Offered Retirement Benefit
- Paid Vacation and Excellent Time Off Package

Intrinsic Career Benefits

- Helping People
- Building lasting friendships with fellow firefighters
- Building lasting technical skills
- Maintain physical fitness
- Operate state of the art apparatus & equipment





IOS Recruitment and Testing Services

Berwyn Fire Department

Entry Level Firefighter Application Instructions

Berwyn Fire Department Required Documents

Due: Thursday, June 25, 2020 at 4:00 p.m.

- Confirmed Online Application** Write Your Confirmation Number Here: _____
- Consent and Release Agreement (2 pages) – must be signed and dated by applicant**
- City of Berwyn Authorization and Release Forms (4 pages) – must be signed and dated by applicant**
- Physical Fitness Certificate (1 page) – a medical doctor’s signature is required**
- COPY of High School Diploma or GED**
If you do not have a copy of your high school diploma, please submit a copy of your high school transcripts (showing graduation date) or a signed letter on school letterhead with your name and date of graduation.
- COPY of Valid Driver’s License**
Include copy of both sides only if license bears renewal sticker.
- COPY of Birth Record as Proof of Citizenship**
The following documents are accepted as proof of citizenship:
- COPY of U.S. COUNTY/STATE-ISSUED BIRTH RECORD
 - COPY of VALID U.S. PASSPORT
 - COPY of NATURALIZATION PAPERS
 - COPY of PERMANENT RESIDENT CARD
- COPY of Valid Illinois OSFM Firefighter II/Basic Operations Firefighter Certification**
- Optional: Copy of Valid CPAT and Ladder Climb Certification**
- Optional: Copy of Military DD-214**
- Optional: Copy of IDPH Paramedic License**
- Optional: Copy of college/university official transcripts**

Please deliver signed release form and all required documents to the address below by

Friday, May 6, 2022 at 2:00 p.m.

IOS Recruitment, ATTN: Berwyn FD

1520 Kensington Rd, Suite 110, Oak Brook, IL 60523

Please be sure to carefully review checklist and application instructions before submission. Incorrect, missing, or otherwise incomplete applications will be cause for disqualification. IOS Recruitment is not responsible for late, misdirected or incomplete applications. Contact IOS Recruitment before the application deadline with any questions regarding the application, required documents or testing.





IOS Recruitment and Testing Services Berwyn Fire Department Consent & Release Agreement

CONSENT AND RELEASE FOR JOB APPLICATION, BACKGROUND CHECK AND PHYSICAL ABILITY ASSESSMENT

Application and Background Check

I acknowledge that as a condition of being considered for employment with Berwyn Fire Department ("Employer"), or of my continued employment at Employer, it is required that I consent to an investigation of my background. I hereby authorize Employer and its representative, IOS Recruitment ("IOS Recruitment"), to conduct certain background investigations which may include, but are not limited to, my employment history and references, criminal history, driving records, personal references, verifications of academic credentials and licenses, social media and all publicly accessible content on the internet, military history, and credit and consumer reports, as permitted under the federal Fair Credit Reporting Act ("FCRA") and local or state credit privacy laws if applicable. If requested by Employer or IOS Recruitment, I hereby consent to participate in a personal interview, testing process, polygraph examination, and/or post-offer psychological evaluation.

All information obtained by Employer or IOS Recruitment pursuant to this background check shall be confidential and safeguarded against disclosure to all unauthorized persons. I hereby release and hold harmless any person, firm, or entity that discloses matters in accordance with this consent, from liability that might result from the request for, use of, and/or disclosure of any background information, as described above. I further release and hold harmless Employer and IOS Recruitment, and their respective designees, personnel and affiliated companies, from any liability resulting from or in connection with, the results of this background investigation concerning my fitness for employment or continued employment at Potential Employer.

I hereby consent to this background information investigation by Employer or IOS Recruitment. I understand that I may request a copy of any consumer report from the consumer reporting agency that compiled the report, in accordance with the requirements of the FCRA.

Conduct and Communications

I acknowledge that my conduct throughout the application and testing process and my compliance with the rules of the application process constitute information that can be considered and evaluated by hiring agencies (Employers). I consent that all interactions and communications that occur between myself and IOS Recruitment or Employer pursuant to this application process may be documented and/or communicated to any and all hiring authorities to which I am seeking employment.



IOS Recruitment and Testing Services Berwyn Fire Department Consent & Release Agreement

Physical Ability Tests

I further acknowledge that as a condition of being considered for employment with Employer, or of my continued employment at Employer, I may be required to participate in a physical ability test, which may test my physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to: actions of other people including, but not limited to, participants, volunteers, spectators, testing officials, and/or testing monitors; lack of hydration, weather, and/or other natural conditions. I hereby assume all of the risks of participating in any physical ability test.

I certify that I am physically fit, have sufficiently trained for participation in this physical ability test, and have not been advised otherwise by a qualified medical person.

By signing below, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) waive, release, and discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me during the physical ability test and/or while traveling to and from this physical ability test, Employer and IOS Recruitment, and their directors, officers, employees, volunteers, representatives and agents, (B) indemnify and hold harmless all entities or persons mentioned in this paragraph from any and all liabilities, damages (including attorney fees and costs) or claims made by other individuals or entities as a result of my participation in this physical ability test.

I hereby consent to receive medical treatment that may be deemed advisable in the event of injury, accident, and/or illness during any physical ability test.

I understand that during a physical ability test I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by Employer and/or IOS Recruitment.

This document shall be construed broadly to provide a release and waiver to the maximum extent permissible under the applicable law.

I hereby certify that I have read this document and I understand its content.

Print Name: _____ Social Security Number: _____

Signature: _____ Date: _____



Berwyn

Fire Department



6700 W. 26th Street
Berwyn, Illinois 60402
Phone (708) 484-1644
(Fax) 708-788-3093 Emergency 9-1-1

Authorization to Release Information and Waiver

I, _____, an applicant for a position with the Berwyn Fire Department (hereinafter "BFD"), understand that the BFD needs to thoroughly investigate my personal and employment histories to evaluate my qualifications to hold the position for which I have applied. It is in the public's interest that all relevant information concerning my personal and employment histories be disclosed to the BFD.

NOTE TO EMPLOYERS: 745 ILCS 46/10 entitled "No liability for providing truthful information" states: "Any employer or authorized employee or agent acting on behalf of an employer who, upon inquiry by a prospective employer, provides truthful written or verbal information, or information that it believes in good faith is truthful, about a current or former employee's job performance is presumed to be acting in good faith and is immune from civil liability for the disclosure and the consequences of the disclosure. The presumption of good faith established in this Section may be rebutted by a preponderance of the evidence that the information disclosed was knowingly false or in violation of a civil right of the employee or former employee."

I do hereby authorize any representative of the BFD bearing this release to obtain any information in your files pertaining to my employment records and direct you to release such information upon request of the bearer. I also authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of the BFD, whether said records are of public, private, or confidential nature. The intent of this authorization is to give my consent for full and complete disclosure. THIS AUTHORIZATION IS NOT TO INCLUDE ANY MEDICALLY RELATED HISTORY OR WORKERS' COMPENSATION ACT OR WORKERS' OCCUPATIONAL DISEASE ACT CLAIMS.

Reiterate and emphasize that the specific intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation that may provide pertinent data for the BFD to consider in determining my suitability for employment.

I consent to your release of any and all public and private information that you may have concerning me for the following: employment and pre-employment information, including, but not limited to, background reports and efficiency/performance ratings, attendance records, but excluding information relating to medical conditions and medical history (unless a conditional offer of employment has been made) any internal affairs investigations and discipline, including any files deemed to be confidential and/or sealed complaints or grievances filed by or against me the records or recollections of attorneys at law, or other counsel, whether representing me or any other person in any case, either criminal or civil, in which I presently have, or have had an interest, excluding any medical malpractice or workers' compensation claims, personal background and reputation, military service records, educational records, financial and/or credit records including loans, commercial or retail credit agencies (including credit reports and/or ratings) any and all records maintained by any criminal justice or corrections agency

including incident reports, arrest records, traffic citations and criminal history information any information contained in investigatory files.

I hereby release you, as the custodian of such records, your records, your organization, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization to release information or any attempt to comply with it. I direct you to release such information upon request of the duly authorized representative of the BFD regardless of any agreement I may have previously made to the contrary. For and in consideration of the BFD acceptance and processing of my employment application, I agree to hold the organizations, its agents and employees harmless from any and all claims and liability associated with my employment application or in any way connected with the decision whether or not to employ me with the BFD, including any liability or damage pursuant to any state or federal laws.

I understand that should information of a serious criminal nature surface as a result of this investigation, such information may be turned over to the proper authorities. I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regarding access of and to disclosure of records, and I waive those rights with the understanding that information furnished will be used by the CPD in conjunction with employment procedures.

I also understand that by signing this release, I specifically waive any written notice to me of the disclosure of any disciplinary report, letter of reprimand, or other disciplinary action as required by the Illinois Personnel Record Review Act-820 ILCS 40/7.

A photocopy/FAX copy of this release will be valid as an original thereof, even though said photocopy/FAX copy does not contain an original writing of my signature. Should there be any questions as to the validity of this release, you may contact me at the listed address below.

I further understand that I waive any right or opportunity to read or review any and all information provided in the background investigation report prepared by the BFD or its attachments and that all information and documents provided to the BFD become the property of the BFD and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents/employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or reason of complying, or any attempt to comply with this request.

By signing below, I certify that I have had adequate time to review this entire form and have read and clearly understand its purpose.

Signature: _____ Date: _____

Address: _____ Phone: _____

Date of Birth: _____

Social Security No.: _____

Witness: _____ Date: _____



Berwyn

Fire Department



6700 W. 26th Street
Berwyn, Illinois 60402
Phone (708) 484-1644
(Fax) 708-788-3093 Emergency 9-1-1

RELEASE OF INFORMATION

Name of Applicant: _____

Last

First

Middle

In consideration for my possible employment Berwyn Fire Department, I hereby authorize the Department of Fire and the Board of Fire and Police Commissioners and the City of Berwyn, to conduct any and all investigation(s) which it (they) deems necessary relating to my personal background, both past and present.

Such investigation may be inclusive of, but are not limited to: driving history, credit history, criminal history, employment history, personal evaluation by employers, references and acquaintances and military service

I agree to indemnify and save harmless the City of Berwyn and its officers and employees, agents and any other person, agency or entity and its employees from any action arising out of the release or obtaining of such information, regardless of whether any information obtained from such investigation are accurate

Signature of Applicant: _____

Signature of Witness: _____

Date: _____



Berwyn Fire Department



6700 W. 26th Street
Berwyn, Illinois 60402
Phone (708) 484-1644
(Fax) 708-788-3093 Emergency 9-1-1

Date: _____

I, _____, _____
(Name-First, Middle, Last) (Date of Birth)

(Address) (City and State)

hereby grant the Berwyn Fire Department and agents thereof, permission to run a driver's license record check, as well as a computerized and/or fingerprint record check to determine any prior criminal history I may have pursuant with my work application for the City of Berwyn. I understand that this information will only be utilized for the purpose stated above and will not be released to any other investigative agency without my prior permission.

SIGNED: _____

WITNESS: _____

PHYSICAL FITNESS CERTIFICATE

THIS CERTIFICATE SIGNED BY A PA, RN or LPN WILL NOT BE ACCEPTED AND WILL RENDER YOU INELIGIBLE TO TEST.

I, the undersigned doctor, certify that I am a medical physician, licensed to practice in the state of _____, and that I have examined _____ ("Applicant") and have found that s/he is physically capable of participating in the Physical Ability Examination consisting of various strenuous exercises.

ATTACH DOCTOR'S BUSINESS CARD HERE

DOCTOR'S CERTIFICATION

Signed this _____ day of _____, 20__.

APPLICANT'S VERIFICATION

Signed this _____ day of _____, 20__.

DOCTOR'S SIGNATURE (M.D. OR D.O.)
INK signature required; PA, LPN or RN **not** accepted

Applicant Signature INK signature required

Doctor's Name, printed SPECIFY M.D. or D.O.

Applicant Name, printed

Street Address, printed

Street Address, printed

City, State Zip Code, printed

City, State Zip Code, printed

Telephone Number

Telephone Number

This certificate must be completed and returned to IOS Recruitment with your application by 4:00 p.m. CST on Thursday, June 25, 2020. No applicant will be permitted to take the physical ability test or to continue with the written testing process unless this signed certificate is on file with the City of Berwyn Board of Fire and Police Commissioners and dated by a physician within no more than one year prior to physical ability test.

**ONLY ORIGINAL CERTIFICATES WITH ORIGINAL SIGNATURES WILL BE ACCEPTED;
NO FAXES OR COPIES.**