

FORM 2

CHANNAHON FIRE PROTECTION DISTRICT - STATE OF ILLINOIS
FIREFIGHTER APPLICANT PERSONAL DATA QUESTIONNAIRE

FIREFIGHTER APPLICATION PACKET NUMBER: _____
FOR INTERNAL USE ONLY

1. **Name** _____
last first middle
2. **List any other names you have used or been known by (include maiden name):** _____

3. **Address:** _____
Number & Street City State Zip
4. **Phone No. to best be reached** (_____) _____
5. **E-mail address to best be reached** _____
6. **Driver's License State** _____
Driver's License No. _____ **Class** _____
7. **Social Security No.** _____
8. **Firearm Owner's I.D. No.** _____
9. **Are you authorized to work in the United States?** Yes _____ No _____

LIST ALL FORMER ADDRESSES FOR THE PAST TEN YEARS IN CHRONOLOGICAL ORDER

10. **Address** _____
Number & Street City State Zip
11. **Address** _____
Number & Street City State Zip
12. **Address** _____
Number & Street City State Zip
13. **Address** _____
Number & Street City State Zip
14. **Address** _____
Number & Street City State Zip

EDUCATION

15. **CIRCLE HIGHEST GRADE COMPLETED**

GED CERTIFICATE HIGH SCHOOL COLLEGE 1 2 3 4
GRADUATE SCHOOL M.A. Ph.D. OTHER

	Name and Address of School (include City and State)	Date(s) Attended	Graduate ? Yes No
16.	High School _____		
17.	Undergraduate Education _____		
18.	Graduate Education _____		
19.	Trade Schools _____		
20.	Paramedic School _____		
21.	EMT School _____		
22.	What college degrees have you attained? _____		
23.	List course work relevant to position for which you have applied: _____ _____ _____		

MILITARY

24. Are you now or have you ever been in the military service? Yes ____ No ____
25. Branch of service _____
26. Are you now or were you ever an active member of any branch of the U.S. Military Reserve Forces or National Guard Unit? Yes _____ No _____
- Rank _____
27. Unit _____ From _____ To _____

CONVICTION HISTORY

28. Have you ever been convicted of a felony offense?
Yes _____ No _____
- 28a. Have you ever been convicted of a misdemeanor offense?
Yes _____ No _____

If "Yes," explain below:

DATE	POLICE AGENCY	OFFENSE	DISPOSITION OF CASE

29. List all traffic convictions and accidents you have had in the last four years. (If more room is needed, please type on a separate page and attach).

LOCATION (City-State)	APPROXIMATE DATE	VIOLATION	DISPOSITION

EMPLOYMENT HISTORY

List all jobs you have had for the last ten years. Include periods of unemployment. Put your present job first. Include military service in proper time sequence along with temporary or part-time jobs.

30. **Present employer's name:** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to Present
month-year

31. **Employer's name** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____
month-year month-year

32. **Employer's name** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____
month-year month-year

33. **Employer's name** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____
month-year month-year

34. **Employer's name** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____

month-year month-year

35. **Employer's name** _____ **Phone** _____

Address _____

Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____

month-year month-year

36. **Employer's name** _____ **Phone** _____

Address _____

Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____

month-year month-year

37. **Employer's name** _____ **Phone** _____

Address _____

Number & Street City State Zip

Job Description _____

Do you object to our contacting them? _____

Employed _____ to _____

month-year month-year

38. Have you ever been suspended or terminated, other than from an economic layoff, from any prior employment? Yes _____ No _____ If yes, please explain:

39. Have you ever resigned from any employment position because of misconduct or unsatisfactory performance or while under investigation? Yes _____ No _____
If yes, explain: _____

40. Have you ever taken a civil service exam? Yes _____ No _____
Agency _____ Date _____ Position on List _____
Status _____

41. Are you currently on any eligibility list(s)? Yes _____ No _____
If yes, indicate position applied for, status on list and expiration date of each: _____

REFERENCES

Please list three adults not related to you and not former employers, who have known you for more than three years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality, and other qualities.

42. Name _____ Address _____
Home Phone _____ Business Phone _____
Occupation _____ Relationship _____

43. Name _____ Address _____
Home Phone _____ Business Phone _____
Occupation _____ Relationship _____

44. Name _____ Address _____
Home Phone _____ Business Phone _____
Occupation _____ Relationship _____

45. Explain your reasons for wanting to become a firefighter and/or paramedic: _____

46. Please review the enclosed job description for the position for which you are applying and state whether you can perform the essential job functions listed therein with or without reasonable accommodation.

Yes _____ No _____

47. If accommodation is needed, please explain: _____

48. Person(s) to be notified in case of emergency.

Name _____ Address _____

Phone _____ Relationship _____

Name _____ Address _____

Phone _____ Relationship _____

Name _____ Address _____

Phone _____ Relationship _____

SUBMISSION OF DOCUMENTATION AND CREDENTIALS

49. I understand that if I am placed on any eligibility list, I will be fingerprinted, and a set of my fingerprints will be furnished to the Illinois Department of State Police and to the Federal Bureau of Investigation.

50. I understand that I must provide the Board of Fire Commissioners with COPIES of the following documentation and/or certifications at the times indicated below. Other relevant fire service certificates, such as EMT or Paramedic, Basic Operations Firefighter Certificate, Advanced Technician Firefighter, Hazardous Materials Awareness or Hazardous Material Operations, may be submitted with the application but are not required. If at any time any of the documentation is updated or if my credentials change, I must submit the new documentation or certifications to the Commission as soon as possible. I further understand that failure to submit any of the following documentation and/or certifications at the times indicated may result in my application no longer being considered by the Commission and/or loss of my position on the eligibility list or withdrawal of a conditional offer of hire.

DOCUMENTATION

TIME OF SUBMISSION

Channahon Fire Protection District Authorization Form

With this application

Copy of High School or GED diploma
(Do not send college certificates as substitutes)

With this application

Basic Operations Firefighter Certificate

With this application

EMT-B License

With this application

IDPH Paramedic License

At date of conditional offer of hire

Set of Fingerprints	After eligibility register is created but before a conditional offer of hire
Valid Driver's License	With this application
Valid CPAT Certification	At time of employment offer
One of the following:	With this application
<ul style="list-style-type: none"> - Birth certificate issued by the State Department, Form FS-545 - Birth certificate issued abroad by the State Department, Form DS-1350 - Original or certified copy of a birth certificate issued by a state, county, or municipal authority, bearing a seal - Native American tribal documents - U.S. citizen identification card, INS Form 1-197 - Identification card for use of a resident citizen in the U.S., INS Form 1-179 	

I HEREBY CERTIFY THAT I HAVE READ THE ABOVE QUESTIONS AND STATEMENTS, AND I CERTIFY THAT THERE ARE NO MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS IN THIS QUESTIONNAIRE, AND THAT ALL MY ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT MISREPRESENTATIONS, OMISSIONS OR FALSIFICATIONS ON THIS QUESTIONNAIRE OR AT ANY TIME DURING THE HIRING PROCESS MAY RESULT IN MY APPLICATION NO LONGER BEING CONSIDERED OR IN TERMINATION OF MY EMPLOYMENT WITH CHANNAHON FIRE PROTECTION DISTRICT.

Dated at _____ Illinois, this _____ day of _____, 20____.

Signature in Full _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. This organization is committed to the policy of equal employment opportunity in recruitment, hiring, career advancement, and all other personnel practices. Your job related experience and other qualifications will be considered without discrimination on the grounds of race, color, religion, sex, national origin, age, or physical or mental handicap. All information provided in this application will be treated confidentially, and will be used only to help assure the best use of your abilities if you are employed with us.

**CHANNAHON FIRE PROTECTION DISTRICT
AUTHORIZATION FORM**

I, _____, hereby authorize the CHANNAHON FIRE PROTECTION DISTRICT and its agents, employees or representatives to obtain and use all information relating to my previous and current employment, education, military record, criminal conviction history, personal characteristics and all other information which may bear favorably or unfavorably upon my application for employment made to the CHANNAHON FIRE PROTECTION DISTRICT. I also consent to the release to the CHANNAHON FIRE PROTECTION DISTRICT of any and all medical records prepared during the physical examination I am required to undergo for employment with the CHANNAHON FIRE PROTECTION DISTRICT. I further release from liability any person or persons providing or receiving any such information in connection with this pre-employment investigation.

I understand that I will undergo a physical ability test as part of the application process and that such physical ability test shall subject me to vigorous physical exercise. I further understand that I should be in appropriate physical condition before performing the test. I certify that I am physically fit, have sufficiently trained for participation in the physical ability test, and have not been advised otherwise by a qualified medical person.

I also agree to indemnify and hold harmless the CHANNAHON FIRE PROTECTION DISTRICT, the Board of Fire Commissioners of the CHANNAHON FIRE PROTECTION DISTRICT, the individual trustees and commissioners, employees and agents against any claim or loss whatsoever, including but not limited to attorneys' fees and any cost of defense which arises directly or indirectly out of any injury which I might sustain in the job task test and/or application process. I also covenant that for the consideration of my application, I agree not to sue the CHANNAHON FIRE PROTECTION DISTRICT, the individual trustees and commissioners, employees and agents for any injury, loss or damage as a result of such process including but not limited to personal injury, wrongful death, court costs, attorneys' fees and interest, in any manner caused directly or indirectly, including the negligent acts or omissions of the CHANNAHON FIRE PROTECTION DISTRICT, its trustees and commissioners as well as its employees and agents.

I hereby acknowledge and agree that as a condition of employment with the CHANNAHON FIRE PROTECTION DISTRICT, I must maintain at all times a valid State of Illinois Driver's License, of the Class required to operate all vehicles of the CHANNAHON FIRE PROTECTION DISTRICT. I do further agree that my failure to maintain said driver's license will constitute reason for withdrawal of a conditional offer of hire or just cause for my dismissal from employment with the District. At time of hire, I must qualify for, obtain, and maintain at all times a valid State of Illinois Basic Operations Firefighter Certificate and Paramedic License. I do further agree that my failure to obtain and maintain the requisite certifications and fulfill my probationary employment requirements will constitute reason for withdrawal of a conditional offer of hire or just cause for my dismissal from employment with the District.

Signature _____

SUBSCRIBED and SWORN to
before me this _____ day of
_____, 20__.

Notary Public

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. This organization is committed to the policy of equal employment opportunity in recruitment, hiring, career advancement, and all other personnel practices. Your job related experience and other qualifications will be considered without discrimination on the grounds of race, color, religion, sex, national origin, age, or physical or mental handicap. All information provided in this application will be treated confidentially, and will be used only to help assure the best use of your abilities if you are employed with us.

Form 3

**CHANNAHON FIRE PROTECTION DISTRICT
PREFERENCE POINTS FOR FIREFIGHTER CANDIDATES**

DISCLAIMER:

The Board reserves the right to establish the amount of preference points to be awarded for every category except preference points for veteran status and fire cadet experiences. The Board will state any available preference points in the remaining categories at the time notice of the examination is posted.

Forms 3 and 3A are for example purposes only.

Candidates who are eligible for preference points may submit a claim for these points in writing to the Board of Fire Commissioners on its standard form (Form 4). The claim and supporting documentation must be made at the time and date specified by the Board or the points will be deemed waived.

Up to five types of preference points may be claimed by applicants:

1. **Experience Preference Points**

Any applicant who, on or after August 20, 1993, has been a paid-on-call or part-time certified Basic Operations Firefighter and/or paramedic of the Channahon Fire Protection District shall be awarded one-half point for each year of successful service, up to a maximum of five (5) points at the time of the posting of the initial eligibility list. Any applicant who, on or after August 20, 1993, has been a paid-on-call or part-time certified Advanced Technician Firefighter of the Channahon Fire Protection District shall be awarded one (1) point per year of successful service, up to a maximum of five (5) points at the time of the posting of the initial eligibility list.

Any applicant from outside the Channahon Fire Protection District who were employed as full-time certified Basic Operations Firefighters for at least two (2) years at another fire protection district or municipality shall be awarded one-half (½) point for each year up to a maximum of five (5) points. Any applicant from outside the Channahon Fire Protection District who was employed as a full-time certified Advanced Technician Firefighter for at least two (2) years at another fire protection district or municipality shall be awarded one (1) point per year to a maximum of five (5) points at the time of the posting of the initial eligibility list. No experience preference points will be awarded to an applicant for service with a private employer who had a contract for fire or ambulance service with a fire protection district or municipality; (70 ILCS 705/16.06b(h)(5)). All requests for preference points shall be made on **Form 6**.

Proof of such service must include submission of copies of applicable certificates and a sworn affidavit by the applicant (see attached form). Note that proof of POC or full-time service may be verified by the District. Also note that an applicant may not receive experience preference points for a certificate if the amount of points awarded would place the applicant before a veteran on the eligibility list. Finally, no person shall be awarded more than the maximum of five (5) points for experience.

2. **Veteran's Preference Points**

Applicants who served in the United States military actively for at least one year and who were honorably discharged or are now on inactive or reserve duty shall receive five (5) points. Proof of such service must include a copy of Military Form DD-214 (long form) as proof of active service, evidence of the honorable discharge and a sworn affidavit by the applicant (**Form 10 Affidavit**).

3. **Educational Preference Points**

Applicants who have successfully obtained an advance degree from accredited college or university shall be awarded the following receive the following points:

Associate's Degree (Non-Field Related)	1 pt.
Associate's Degree (Field Related)	2 pts.
Bachelor's Degree (Non-Field Related)	3 pts.
Bachelor's Degree (Related)	4 pts.
Master's Degree	5 pts

If a candidate has more than one degree, they may receive points earned in any combination up to 5 pts.

A copy of the degree must be included with the request for preference points as proof of the attainment of degree. If a copy of the degree cannot be provided, the candidate may provide official transcripts for the said degree; (70 ILCS 705/16.06b(h)(3)).

4. **Residency Preference Points**

Any applicant whose principal residence is located within the District's jurisdiction shall be awarded up to five (5) preference points. Candidates will receive 1 point for each year of completed residency. No prorated points will be awarded for partial years; (70 ILCS 705/16.06b(h)(6)). **(Form 4D)**

5. **Fire Cadet Experience**

Applicants who have successfully completed two (2) years of study in fire techniques or cadet training within a cadet program established under the rules of the Joint Labor and Management Committee (JLMC), as defined in Section 50 of the Fire Department Promotion Act, shall receive two (2) points. An official transcript with seal or other comparable documentation must be included with the request for preference points as proof of such experience; (70 ILCS 705/16.06(b)(h)(2)).

6. **Additional Preference Points**

The applicant will receive up to a maximum of 5 additional preference points for any of the following:

One point for each year of completed service as Channahon Fire Protection District Contract Firefighter/Paramedic. A letter from the Fire Chief must accompany the request for preference points. **(Form 6)**

One point for each year of completed service on an industrial facility fire brigade, platoon, or emergency response team as a firefighter, emergency medical responder, or hazardous materials team member. Applicant must be currently employed and serving at a facility with a recognized fire brigade, platoon, or emergency response team. Copies of industrial related fire suppression, emergency response, or hazardous materials certifications/training must accompany the request for preference points. **(Form 6)**

Two points for demonstrated fluency within a foreign language or ability to communicate through sign language. The Board reserves the right to verify the point claim by verification of a trained individual in the selected foreign language or sign language.

Form 4

**CHANNAHON FIRE PROTECTION DISTRICT
PREFERENCE POINT CLAIM FORM AND AFFIDAVIT**

Candidates who are eligible for preference points may submit a claim for these points in writing to the Board of Fire Commissioners on its standard form (Form 4). The claim and supporting documentation must be made at the time and date specified by the Board or the points will be deemed waived.

A. Experience Preference Points (70 ILCS 705/16.06b(h)(5))

Please state the relevant dates of successful service in the following capacities and attach Basic Operations Firefighter Certificate, Advanced Technician Firefighter, and/or Paramedic Certificates or licenses; do not include employment with any private company or service even if that employment provided service to a fire district or municipality. **(Form 6)**

1. **Channahon Protection District
Paid-On-Call Basic Operations Firefighter and/or Paramedic**

Date of Service (month/date/year): _____ to _____

2. **Channahon Fire Protection District
Paid-On-Call Advanced Technician Firefighter**

Date of Service (month/date/year): _____ to _____

3. **Full-time Basic Operations Firefighter and/or Paramedic**

Name of Department/District: _____

Address: _____

Phone Number: _____

Date of Service (month/date/year): _____ to _____

Name of Department/District: _____

Address: _____

Phone Number: _____

Date of Service (month/date/year): _____ to _____

4. **Full-time Advanced Technician Firefighter**

Name of Department/District: _____

Address: _____

Phone Number: _____

Date of Service (month/date/year): _____ to _____

B. Veteran's Preference Points (70 ILCS 705/16.06b(h)(i))

Please state the following information regarding your military service and attach form DD-214 (long form) and proof of honorable discharge: **(Form 10 Affidavit)**

Branch of Service: _____

Unit: _____

Rank: _____

Date of Service (month/date/year): _____ to _____

Date of Honorable Discharge: _____

C. Educational Preference Points (70 ILCS 705/16.06b(h)(3))

Please state the following information regarding your educational background and attach copies of diplomas as proof of the attainment of a degree:

College Attended: _____

Dates of Attendance (month/date/year): _____ to _____

Degree Awarded: _____

College Attended (if applicable): _____

Dates of Attendance (month/date/year): _____ to _____

Degree Awarded: _____

D. Residency Preference Points (70 ILCS 705/16.06b(h)(6))

Please state the following information regarding your principal residence and attach a copy of a recent utility bill clearly showing: (i) date of invoice not to exceed four (4) weeks of the application for preference points; (ii) applicants name as it appears on the application; and (iii) address of applicant as proof of residence. Any additional information not included here, may be redacted from the copy submitted, though no further alterations may be done. **(Form 4D)**

Address of Principal Residence: _____
Number & Street City State Zip

Description of Proof Submitted: _____

E. Fire Cadet Experience

Please state the following information regarding your experience in a fire cadet or explorers program established under the rules of the Joint Labor and Management Committee (JLMC), as defined in Section 50 of the Fire Department Promotion Act. A letter from the host fire cadet director or sponsor verifying successful completion of the program must be attached. Other supporting documents such as transcripts or completion certificates may be used to supplement the verification.

Program Name: _____ Host School or Agency: _____

Address of Host School or Agency: _____
Number & Street City State Zip

Name of fire cadet or program director/sponsor: _____

F. Additional Preference Points (70 ILCS 705/16.06b(h)(7))

Please state the following information regarding availability of additional preference points and attach copies of any documents as necessary proof of availability of points.

Description: _____

STATE OF ILLINOIS)
) SS
COUNTY OF _____)

CANDIDATE'S AFFIDAVIT

I, _____, being first duly sworn on oath, state
Name of Candidate

that the information set forth in my Channahon Fire Protection District Preference Point Claim Form is true and correct. I understand that any misrepresentation, falsification, or material omission may result in my application no longer being considered by the District, removal from the hiring list, and/or dismissal from the District.

Candidate's Signature

Subscribed and Sworn to
before me this _____ day
of _____, 20____
Notary Public

For District Use Only

Date Initial Eligibility was posted: _____

Date of Submission of Claim Form: _____

Received by: _____



Channahon Fire Protection District

Residency Preference Points Claim Form #4D

Please complete this informational sheet and return the sheet and your proofs of residency to Station #1, 24929 S. Center Street, Channahon, IL. The original of this form along with copies of the proofs of residency shall accompany the CFPD Form #4 Preference Point Claim and Affidavit.

Candidate Name: _____

Street Address: _____

Date of Initial Residency at this Address: _____

Number of Years at this Address: _____

Residency Proofs:

Any two (2) of the following examples may be used to prove residency. Examples must be current (within the last two months unless otherwise noted) and must show an address and service address (if applicable) in the Channahon Fire Protection District. Bill/payment stubs, "deposit required" letters, or any bill indicating a service may be or is interrupted or disconnected due to an unpaid balance are not acceptable proofs of residency.

<p><u>IF YOU ARE A PROPERTY OWNER:</u></p> <p>Minimum of two (2) of the following:</p> <p>_____ Electric Bill</p> <p>_____ Gas Bill</p> <p>_____ Water Bill</p> <p>_____ Land Line Phone Bill</p> <p>_____ Cable TV Bill</p> <p>_____ Internet Bill</p> <p>_____ Real Estate Tax Bill (last issued)</p>
--

<p><u>IF YOU ARE A RENTER:</u></p> <p>Copy of a Valid Lease (must include property owner contact information) must be submitted with one (1) of the following:</p> <p>_____ Valid Renter's Insurance Policy</p> <p>_____ Electric Bill</p> <p>_____ Gas Bill</p> <p>_____ Water Bill</p> <p>_____ Land Line Phone Bill</p> <p>_____ Cable TV Bill</p>
--

Print Name: _____

Signature: _____

Date: _____

Form 6

**CHANNAHON FIRE PROTECTION DISTRICT
VERIFICATION OF EMPLOYMENT DATA FORM**

To the Employer:

_____ has requested preference points pursuant to Section 16.07 of the Fire (Applicant) Protection District Act, for the final eligibility list for hire with the Channahon Fire Protection District. Before the Commission awards these points, we ask that you complete the following form which we will use to verify information supplied to us by the applicant. Please use the date that the applicant obtained certification as the beginning date unless he or she had the certification prior to employment.

If you are unable to return this form by _____, please contact _____
_____.

Thank you very much,

Board of Fire Commissioners
Channahon Fire Protection District

I, the undersigned, on behalf of _____, (hereinafter the "Department")
(Fire Protection District or Municipality)

(Address)

hereby certify that _____ was/has been employed with the Department in
(Applicant)

the following capacities:

1. **Full-time Basic Operations Firefighter and/or Paramedic**

Dates of service (month/date/year): _____ to _____
_____.

2. **Full-time Advanced Technician Firefighter**

Date of Service (month/date/year): _____ to _____
_____.

Signed this _____ day of _____, _____.

Signature

Print Name

Title

Form 7

**CHANNAHON FIRE PROTECTION DISTRICT
INITIAL EMPLOYMENT AGREEMENT**

This Agreement is made and entered on the date set forth next to the signature of each party hereto, by and between _____
(the "Employee") and the Channahon Fire Protection District (the "District"), Will County, Illinois.

IT IS HEREBY AGREED:

TERMS AND CONDITIONS

1. Upon execution of this Initial Employment Agreement (the "Agreement"), the Employee is hereby authorized to be offered a Certificate of Appointment by the Board of Fire Commissioners as a probationary employee as long as the Employee is qualified. This offer of a Certificate of Appointment is contingent upon the Employee passing the employment medical and psychological examination. Such probationary period extends for one (1) year from the first day of actual work on the job.

2. During this probationary period, the Employee is an "at will" employee and may be dismissed at any time for any reason by the Board upon recommendation of the Chief of the District.

3. Compensation and fringe benefits during this probationary period are as set forth in the District's policies.

4. Employee shall be assigned to training and duties pursuant to the ordinances, resolutions, rules and regulations, and practices of the District.

LIQUIDATED DAMAGES

5. Employee hereby recognizes the cost to the District of hiring and training, and in consideration of this Agreement, hereby agrees to reimburse the District for the costs of the Employee's hiring and training pursuant to the provisions of this Agreement.

6. In the event that the Employee passes the medical and psychological examination, yet fails to accept a Certificate of Appointment, Employee agrees to pay the District its costs of hiring Employee in the amount of \$_____ which shall be considered liquidated damages.

7. If the Employee does not pass the medical and psychological examination, the Employee may not receive a Certificate of Appointment and will not be liable for any costs of hiring or training.

8. In the event that the Employee accepts his or her Certificate of Appointment yet fails to complete his or her probationary period due to any cause other than "termination" as defined below, Employee agrees to pay the District its costs of hiring and training Employee in the amount of \$_____ which shall constitute liquidated damages.

9. The term "termination" as used in this Agreement shall mean any discontinuance of the Employee's employment initiated by the District, and shall also include discontinuance of employment due to injury or illness resulting in the Employee's permanent inability to perform the normal duties of the position held by the Employee at the time of commencement of such injury or illness.

10. Complete payment of the liquidated damages shall be made within twelve (12) months of cessation of employment in equal monthly installments of no less than one-twelfth (1/12) of the total liquidated damages, commencing on the first day of the month following the month during which cessation of employment occurs, and payable on or before the first day of each month thereafter. The District may subtract any liquidated damages from any sums due to the Employee from the District as wages or vacation pay at the time said Employee's payment of liquidated damages first becomes due and owing. The Employee agrees that in the event of his or her failure to make any payment required pursuant to this Agreement in a timely manner, the total amount of the liquidated damages obligation then remaining unpaid, shall immediately become due and payable. The Employee further agrees that in the event the District incurs legal fees or other costs of collection in an effort to collect any delinquent sums owing pursuant to this Agreement, the Employee will pay such expenses in addition to the portion of the liquidated damages then due.

11. Except in the case of a probationary firefighter taking a position with another fire department, the Board may waive any of the terms in paragraphs 6, 8, and 10, including the amount of liquidated damages.

MISCELLANEOUS

12. Employee understands that he or she has the right to have this document examined by an attorney prior to execution.

13. If any paragraph or portion of a paragraph is found to be unlawful by a court, the remaining portion of the paragraph or remaining paragraphs shall still constitute a valid enforceable Agreement.

Dated this _____ day of _____, _____.

President, Board of Trustees
Channahon Fire Protection District

Employee

ATTEST:

Secretary, Board of Trustees
Channahon Fire Protection District

FORM 9

CHANNAHON FIRE PROTECTION DISTRICT PREFERENCE POINTS FOR OFFICER CANDIDATES

Candidates who are eligible for preference points may submit a claim for these points in writing to the Board of Fire Commissioners on its standard form (Form 9). The claim and supporting documentation must be made at the time and date specified by the Board or the points will be deemed waived.

Veteran's Preference Points

Applicants who served in the United States military actively for at least one year and who were honorably discharged or are now on inactive or reserve duty shall receive 7/10 of one point for each six (6) months or fraction thereof of military or naval service not exceeding thirty (30) months, or no more than 3.5 points. Proof of such service must include a copy of Military Form DD214 as proof of active service, evidence of the honorable discharge and a sworn affidavit by the applicant (see Form 11). After completion of the promotional testing process, the Board will prepare an initial eligibility list.

Applicants who are eligible for and elect to utilize their military preference credit must make a claim for such credit in writing to the Board of Fire Commissioners on its standard form within ten (10) days after the posting of the initial eligibility register or such claims shall be deemed waived. The Board shall award veteran's preference points to those eligible veterans timely claiming the credit in accordance with 70 ILCS 705/16.08a; 65 ILCS 5/10-2.1-10, 10-2.1-11, and 10-2.1-12.

No person shall receive veteran's preference for a promotional appointment after receiving one promotion from an eligibility list on which he or she was allowed military preference.

