



# Westover Municipal Fire Department

3345 Westover Road, Westover, Alabama 35147

**Phone:** (205)618-9830 **Fax:** (205)678-3376 **Web:** [www.westoveral.gov/fire](http://www.westoveral.gov/fire)

Micah A. Woodley, *Fire Chief*

David M. Seales, *Captain*

Patrick S. Bennett, *Lieutenant*

Sean J. Mullins, *Lieutenant*

Mark Stachelski, *Lieutenant*



December 05, 2024

Westover Municipal Fire Department is currently accepting applications for part time and fill in personnel. This is a continuous job posting that will remain open indefinitely to ensure a proper applicant pool is maintained to back fill staffing, even if positions are not currently open. Westover Municipal Fire Department provides fire and EMS services to the citizens of Westover and parts of the surrounding unincorporated Shelby County.

## **Department Statistics**

- One station
- One ALS response vehicle
- One BLS pumper
- One reserve pumper
- 300-400 service calls/year
- Automatic/Mutual Aid with surrounding departments

## **Employee Benefits**

- Full Time (24/48), Part Time (24/96), and Fill In (as needed) positions available.
- Firefighter-Paramedic pay rate: \$18.11/hr.
- Firefighter-EMT Advanced pay rate: \$17.25/hr.
- Firefighter-EMT pay rate: \$16.43/hr.
- 10 Recognized Holidays (1.5 times regular hourly rate)

## **Minimum Qualifications**

- Alabama Firefighter I/II certification
- Alabama EMT license
- Hazardous Materials - Awareness and Operations certification
- Alabama driver's license
- Fire Apparatus Operator: Pumper certification (within one year of hire date)

## **Preferred Qualifications**

- Alabama Paramedic license
- Rescue Technician: Rope I
- Rescue Technician: Vehicle and Machinery Extrication I
- Fire Apparatus Operator: Mobile Water Supply

*Application and resume should be submitted to: [chief@westoveral.gov](mailto:chief@westoveral.gov)*



# Westover Municipal Fire Department

3345 Westover Road, Westover, Alabama 35147  
Phone: (205)678-3375 ext. 5 Fax: (205)678-3376  
www.westoveral.gov



Micah A. Woodley, Fire Chief

David M. Seales, Captain

## Application for Employment

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

Name

\_\_\_\_\_  
*Last*

\_\_\_\_\_  
*First*

\_\_\_\_\_  
*Middle*

\_\_\_\_\_  
*Maiden (If applicable)*

### Present Address

\_\_\_\_\_  
*Number*

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*Zip*

How long have you resided at this address? \_\_\_\_\_

### Contact Information

\_\_\_\_\_  
*Telephone Number*

\_\_\_\_\_  
*Email Address*

### Other Information

\_\_\_\_\_  
*Date of Birth*

\_\_\_\_\_  
*Social Security Number*

\_\_\_\_\_  
*Driver's License Number*

\_\_\_\_\_  
*Issuing State*

\_\_\_\_\_  
*Expiration*

### Position Applied For (select all that apply)

\_\_\_\_\_  
*Administrative (M-F)*    \_\_\_\_\_  
*Full Time (24 on/48 off shift)*    \_\_\_\_\_  
*Part Time Regular (24 on/96 off)*    \_\_\_\_\_  
*Fill in (as needed)*

When are you available to start? \_\_\_\_\_

What shift(s) are you available?    A    \_\_\_\_\_    B    \_\_\_\_\_    C    \_\_\_\_\_

### EMS Licensure (if applicable)

\_\_\_\_\_  
*EMSP Level*

\_\_\_\_\_  
*ADPH License Number*

\_\_\_\_\_  
*Expiration*

\_\_\_\_\_  
*NREMT Number*

\_\_\_\_\_  
*Expiration*



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## Fire Service Certifications (Check all that apply, if applicable)

\_\_\_\_\_  
Firefighter I

\_\_\_\_\_  
Firefighter II

\_\_\_\_\_  
Hazmat: A&O

\_\_\_\_\_  
AO: Pumper

\_\_\_\_\_  
RT: Rope I

\_\_\_\_\_  
RT: Extrication I

## Education (Complete all that apply, if applicable)

### High School

_____ <i>School Name</i>	_____ <i>Address</i>	_____ <i>Years Completed</i>	_____ <i>Major/Degree (if applicable)</i>
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_____ <i>School Name</i>	_____ <i>Address</i>	_____ <i>Years Completed</i>	_____ <i>Major/Degree (if applicable)</i>
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### Professional/Trade School/GED Program

_____ <i>School Name</i>	_____ <i>Address</i>	_____ <i>Years Completed</i>	_____ <i>Major/Degree (if applicable)</i>
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## Background Information

Have you ever been convicted of a felony offense?

\_\_\_\_\_  
Yes

\_\_\_\_\_  
No

*If yes, please explain number of conviction(s), nature of offense(s), when offense(s) was/were committed, and sentence(s) imposed below.*

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Have you ever been convicted of a crime?

\_\_\_\_\_  
Yes

\_\_\_\_\_  
No

*If yes, please explain number of conviction(s), nature of offense(s), when offense(s) was/were committed, and sentence(s) imposed below.*

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## Work Experience (if applicable) Most Recent Employer

Organization/Business: \_\_\_\_\_

Job Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_

Employment Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for Leaving:

\_\_\_\_\_  
\_\_\_\_\_

List any specific jobs you held, duties performed, skills used/learned, advancements and/or promotions while you were employed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Other Employer

Organization/Business: \_\_\_\_\_

Job Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_

Employment Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

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Reason for Leaving:

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List any specific jobs you held, duties performed, skills used/learned, advancements and/or promotions while you were employed:

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## Professional References (non-relatives)

Name: 

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Organization/Business: 

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Job Title: 

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Telephone Number: 

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Email Address: 

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Name: 

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Organization/Business: 

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Job Title: 

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Telephone Number: 

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Email Address: 

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## Additional Information

Use the space below to summarize any additional information necessary to describe your full qualifications

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## Application Waiver

In exchange for consideration of my job application by the Town of Westover (hereinafter referred to as "the town"), I agree that:

*Neither the acceptance of this application, nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Town practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the town, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Mayor of the town. Both the undersigned and the town may end the employment relationships at any time, without specified notice or reason. If employed, I understand that the town may unilaterally change or revise their benefits, policies, and procedures and such changes may include reduction in benefits.*

*I authorize investigation of all statements contained in the application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the town permission to contact schools, previous employers, references, and others, and hereby release the town from any liability as a result of such contact.*

*I also understand that (1) the town has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment, (2) consent to and compliance with such policy is a condition of my employment, (3) continued employment is based on the successful passing of testing under this policy, and (4) continued employment may be based on successful passing of job-related physical examination.*

*I understand that, in connection with the routine processing of your employment application, the town may request from a consumer reporting agency and investigate consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the town, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.*

*I further understand that my employment with the town shall be probationary for a period of sixty days, and further that at any time during my probationary period or thereafter, my employment relationship with the town is terminable at will for any reason by either party.*

*The town is an equal employment opportunity employer. We adhere to a policy of making decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with the town depends solely on your qualifications. Thank you completing this application form and for your interest in our business.*

**Signature of Applicant:** \_\_\_\_\_

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

## FOR OFFICE USE ONLY

Hire Date: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_  
Contact Number: \_\_\_\_\_  
Person Authorizing: \_\_\_\_\_

Pay Rate: \_\_\_\_\_  
Height: \_\_\_\_\_  
Weight: \_\_\_\_\_  
Level: \_\_\_\_\_