



LISLE-WOODRIDGE FIRE DISTRICT

Headquarters and Station 51

1005 School Street

Lisle, Illinois 60532

EMERGENCY - 911

Administration 630-353-3000 Fax 630-353-3099

Fire Prevention 630-353-3030 Fax 630-353-3098

www.lwfd.org

ISO Protection Class 1

Over 50 years of service

May 1, 2018

Dear Candidate,

Enclosed you will find three (3) important documents for your review. The first document is an explanation of the Preference Points for Firemedic II candidates. The document clearly explains what constitutes acceptable documentation needed to apply for preference points in each category. The second document is a three (3) page preference points claim form and affidavit. If you are applying for preference points, this form must be completed and notarized. The final document is an attestation for experience preference points that must be completed by your employer.

The "Initial Eligibility Register" for Firemedic II with the Lisle-Woodridge Fire District will be certified and posted on May 23, 2018. The roster will be posted on the District website. In addition, you will receive a letter in the mail. The "Initial Eligibility Roster" will be based on your written test score and oral interview score combined.

All required documentation for preference points must be attached and returned to the Fire District by 08:00hrs on June 1, 2018. Failure to complete the applicable form(s) and return the documents before the deadline will be deemed a waiver of such points.

The "Final Eligibility Register" which includes preference points, will be certified and posted on June 6, 2018. If you have any questions please contact Deputy Chief Steve Demas @ 630.353.3051.

Board of Fire Commissioners
Lisle-Woodridge Fire District

FORM 2B

**LISLE WOODRIDGE FIRE DISTRICT
PREFERENCE POINTS FOR FIREMEDIC CANDIDATES
(SPRING 2018 TEST)**

After the Initial Eligibility Register is created, the 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 2C**). This claim must be made within ten (10) days after posting of the posting of the preliminary eligibility list or the points will be deemed waived.

Four types of preference points may be claimed by applicants:

1. **Veterans Preference Points (70 ILCS 705/16.06b(h)(1)) (Max. 5 Points)**

Applicants who served in the United States military actively for at least one year and who were honorably discharged or are now on active or reserve duty shall receive five (5) points. Proof of such service must include a copy of Military Form DD-214 (long form) as a proof of active service, evidence of honorable discharge and sworn affidavit by the applicant (see **Form 2C**).

2. **Educational Preference Points (70 ILCS 705/16.06b(h)(3)) (Max. 5 Points)**

Applicants who have successfully obtained an Associate's degree from an accredited college or university in the field of fire service, emergency medical services, or a related field or a Bachelor's degree from an accredited college or university in any field shall receive five (5) points. A copy of the diploma must be included with the request for preference points as proof of the attainment of the degree.

3. **Residency Preference Points (70 ILCS 705/16.06b(h)(6)) (Max. 2 Points)**

Applicants who maintain their principal personal residence within the boundaries of the Lisle-Woodridge Fire Protection District at the time of application shall receive two (2) preference points. Proof of residency must be shown in order to obtain the points.

4. **Experience Preference Points (70 ILCS 705/16.06b(h)(5)) (Max. 3 Points)**

Applicants from outside the Lisle-Woodridge Fire Protection District who were employed as full-time certified firefighters or paramedics for at least two (2) years at another fire protection district or municipality shall be awarded one (1) point for each year up to a maximum of three (3) points. No experience preference points will be awarded to applicants for service with a private employer who had a contract for fire or ambulance service with a fire protection district or municipality.

Proof of such service must include submission of applicable certificates and a sworn affidavit by the applicant (see **Form 2C**). Proof of full-time service will be verified by the District. An applicant may not receive experience preference points for a certificate if the amount of the points awarded would place the applicant before a veteran on the Final Eligibility Register

FORM 2C

LISLE-WOODRIDGE FIRE DISTRICT
PREFERENCE POINT CLAIM FORM AND AFFIDAVIT
(SPRING **2018** TEST)

If you wish to claim preference points for the final eligibility list for hire with the Lisle Woodridge Fire District, please complete the following form and submit with the required attachments within ten (10) days after the posting of the Initial Eligibility Register. Failure to submit the request within ten (10) days shall be deemed a waiver of the points.

1. **Veterans Preference Points (70 ILCS 705/16.06b (h) (5))**

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

Branch of Service: _____

Unit: _____

Rank: _____

Date of Service (Month/Date/Year): _____ to _____

Date of Honorable Discharge: _____

2. **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: _____

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

Please provide your primary resident address and attach at least two documents that indicate proof of your residence within the boundaries of the Lisle-Woodridge Fire Protection District:

Home Address: _____

Length of Residence at this Address: _____

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

Please state the relevant dates of successful service in the following capacities and attach OSFM Certified Firefighter II/Basic Operations Firefighter, OSFM Certified Firefighter III/Advanced Technician Firefighter and/or IDPH Paramedic Licenses. Do not include employment with any private company or service even if that employment provided service to a fire district or municipality.

Full-time Firefighter and/or Paramedic

Name of Department/District: _____

Address: _____

Phone Number: _____

Dates of Service (Month/Date/Year): _____ to _____

Name of Department/District: _____

Address: _____

Phone Number: _____

Dates of Service (Month/Date/Year): _____ to _____

STATE OF ILLINOIS)
) SS
COUNTY OF _____)

CANDIDATE'S AFFIDAVIT

I, _____, being first duly sworn
Name of Candidate

on oath, state that the information set forth in my Lisle-Woodridge 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 Register was posted: _____

Date of Submission of Claim Form: _____

Received by: _____

FORM 4

LISLE-WOODRIDGE FIRE DISTRICT
VERIFICATION OF EMPLOYMENT DATA FORM

To the Employer

_____ has requested preference points pursuant to 70 ILCS

705/16.07 for the final eligibility list for hire with the Lisle-Woodridge Fire District. Before the Board of Fire Commissioners 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 return this form by _____. If you have any questions please contact Deputy Chief Steve Demas @ (630) 353-3051.

Thank you very much,

Board of Fire Commissioners
Lisle Woodridge Fire District

I, the undersigned on behalf of

_____ (hereinafter the "Department")
(Fire District or Municipality)

(Address)

hereby certify that _____ was/has been employed with the
(applicant)

Department in the following capacities:

1. Full-time Firefighter II/Basic Operations Firefighter and/or Paramedic
Dates of Service (Month/Date/Year) _____ to _____
2. Full-time Firefighter III/Advanced Technician Firefighter and/or Paramedic
Dates of Service (Month/Date/Year) _____ to _____

Signed this _____ day of _____, 20____

Signature

Print Name

Title