

# UNIFIED GOVERNMENT OF WYANDOTTE COUNTY/KANSAS CITY, KANSAS

#### PARAMEDIC TRAINEE



Anticipated Hire Date: December 9, 2021

Posting Begins: September 2, 2021 Posting Ends: October 6, 2021

Applications and instructions to applicants may be obtained in the Human Resources Department of the Unified Government of Wyandotte County/Kansas City, Kansas, 701 North 7th Street, Rm. 646, Kansas City, Kansas 66101 between the hours of 8:00 am and 5:00 pm<sub>2</sub> Monday through Friday as well as online at www.wycokck.org.

Applicants must be a US citizen; possess and maintain a valid unrestricted driver's license; good moral character; vision with at least 20/100 correctable to 20/30; at least 19 years of age. Must have completed High School or GED by the anticipated date of hire. Applicants must be an Emergency Medical Technician through the State of Kansas or a National Registered Emergency Medical Technician. Candidates must be willing to move into Wyandotte County within twelve months of Employment.

The **Paramedic Trainee** will enter an accredited Paramedic Training Program or be currently enrolled in an Accredited Paramedic Program so that they may meet the minimum requirements necessary in order to enter the Fire Academy as a Recruit Firefighter when practical and feasible. The paramedic courses will be reimbursed up to \$5,000 paid for after receiving a Paramedic Certification and be paid at the end of the first year working as a Firefighter/Paramedic. The Paramedic Trainee must pass the class with a minimum score of a 75 percent average, and/or meet the accredited institution criteria for State testing. Upon completion, the Paramedic Trainee will then be required to test for NREMT-P or Kansas State Paramedic certification as prescribed by the Kansas City Kansas Fire Department. The Paramedic Trainee will be allowed 3 retests for the written state test and 3 retests for the practical portion of the state certification testing. Failure to successfully pass the NREMT-P or Kansas State Paramedic certification with the requisite minimum grade, and/or failure to pass the Paramedic certification testing within the prescribed parameters will result in immediate termination. Additional career enhancement activities may take place if time is afforded according to the scheduled timeframe for Training Division and the occurrence of an applicable Fire Department Recruit Academy. Candidates may be required to participate in a Firefighter I & Firefighter II program and achieve certification and must pass the class with a minimum score of a 2.0 grade point average and meet the KCKCC criteria for State testing. The Firefighter Trainee must comply with all KCKFD policy parameters including code of conduct, grooming standards and scheduled activities and assignments in order to remain in the Paramedic Trainee program. The approximate starting salary is \$2341.73 per month.

#### \*\*INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED\*\*

PLEASE NOTE: YOU MUST PRESENT THE *ORIGINAL* DOCUMENTS REQUIRED – COPIES WILL NOT BE ACCEPTED. HUMAN RESOURCES WILL COPY DOCUMENTS THAT ARE REQUIRED.

#### Applicants applying for Firefighter Trainee must return the completed application with ALL of the following:

- TWO Official High School Transcripts (Sealed Envelope) OR
- TWO Official GED displaying scores (Sealed Envelope) (IF APPLICABLE)
- TWO Official College Transcripts if applicable (Sealed Envelope)
- Birth Certificate (Original State Certified Document) (A COPY IS NOT ACCEPTABLE)
- Valid Unrestricted Driver's License
- DD-214 (Long form which specifies type and reason for discharge if applicant has prior military service)
- Pre-Employment Questionnaire

Applicants applying for the position of Paramedic Trainee will be required to pass a written exam, physical ability exam and preliminary interview. If selected, applicants will proceed to a background check and CVSA (Computer Voice Stress Analysis) evaluation. Applicants selected for a conditional offer of employment will participate in post offer testing to include a psychological evaluation (written assessment and Clinical Assessment Interview) along with a physical and drug screen.





# PARAMEDIC TRAINEE INSTRUCTIONS FOR APPLICANTS

Accepting Applications: September 2 – October 6, 2021

**To Obtain An Application:** Application packets may be picked up in the Human Resources Department of the Unified Government of Wyandotte County/Kansas City, Kansas, 701 North 7<sup>th</sup> Street, Room 646, Kansas City, Kansas 66101 between the hours of 8:00 a.m. and 5:00 p.m. Monday through Friday. The application packet is also available online at <a href="https://www.wycokck.org">www.wycokck.org</a> but must be submitted in-person.

Completed applications, together with all forms required must be filed with Human Resources no later than **5:00 pm on October 6, 2021.** 

Applicants applying for Paramedic Trainee must return, IN-PERSON, the completed application with all of the following ORIGINAL documents:

#### \*\*INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED\*\*

- TWO Official High School Transcripts (Sealed Envelope) OR
- TWO Official GED displaying scores (Sealed Envelope) (IF APPLICABLE) TWO Official College Transcripts – if applicable (Sealed Envelope)
- Birth Certificate (Original State Certified Document) (A COPY IS NOT ACCEPTABLE)
- Valid Driver's License
- DD-214 (Long form which specifies type and reason for discharge if applicant has prior military service)
- Pre-Employment Questionnaire

PLEASE NOTE: YOU MUST PRESENT THE *ORIGINAL* DOCUMENTS REQUIRED – COPIES WILL NOT BE ACCEPTED. HUMAN RESOURCES WILL COPY DOCUMENTS THAT ARE REQUIRED.

#### **Tentative Dates:**

Written Exam: October 11 – 12, 2021 Physical Ability: October 11 – 12, 2021

\*\*Physical Ability Walk Through: October 1 (3 – 5pm) and October 2 (9 – 11am). This will be a HANDS-ON event. You must submit your completed application packet to Human Resources PRIOR to attending.\*\* View the physical ability demonstration video at kckfd.org for preparation tips.

# Kansas City, KS Fire Department Disqualifiers

## **Paramedic Trainee**

- ➤ DUI within the last 3 years
- ➤ Multiple DUI's
- Illicit use of any drug within the last 3 years, excluding marijuana and alcohol, and/or the sale of any illicit drug
- > Falsification of documentation
- > Felony conviction



#### INSTRUCTIONS FOR APPLICANTS

#### Please read carefully

Applications for employment are taken **only** for those positions that are posted. Please follow the instructions below to submit an application.

#### TO APPLY FOR A POSTED POSITION:

- Make an application for the desired position during the time the position is posted, one application per position. Applications will not be accepted after 5:00 pm on the closing date. Some Unified Government openings require that skills tests be completed as part of the application. Applicants who will be called for an interview will complete the skills testing required for the position in Human Resources prior to the interview.
- Applications requiring birth certificate, high school diploma/GED, etc. will only be
  accepted if all documents are present at the time of the submission. We will make copies
  of documentation that are required only. All other copies of documents or extra
  resumes are the responsibility of the applicant.
- Skills test are valid for six months from the date of the test. It is the responsibility of the applicant to inform Human Resources of any prior tests taken. It is also the responsibility of the applicant to inform Human Resources of any change of address or phone numbers made to their application. You may contact Human Resources at 913.573.5660 or at jobs@wycokck.org.
- For an updated listing of employment opportunities, contact the Job Information Line at 913.573.5688 or visit our website at <a href="www.wycokck.org">www.wycokck.org</a>. Resumes may be sent to <a href="jobs@wycokck.org">jobs@wycokck.org</a>. Positions are updated every Thursday. For your convenience, an on-line application is also available on our website.
- The Unified Government is an Equal Opportunity Employer. Should you have concerns regarding the hiring process, please contact the Human Resources Director or designee at 913.573-5660. Applicants can report concerns about discrimination in the hiring process to J. Renee Ramirez, Director of Human Resources, at (913) 573-5660.

Application #	ŧ

# APPLICATION FOR EMPLOYMENT UNIFIED GOVERNMENT OF WYANDOTTE COUNTY/KANSAS CITY, KANSAS

## **Human Resources**

701 North Seventh Street, Suite 646 Kansas City, Kansas 66101-3064

(913) 573-5660 • www.wycokck.org • (913) 573-5688 (Job Line)

PLEASE PRINT	GU V	ERA	>
Name: (Last)	(First)	(M.I.)	
Other name under which you hav	ve worked:		
Current Address: (Number and Street	1)		
(City)	(State	<u>-</u> e)	(Zip Code)
PM Phone: ( ) -	_ AM Pl	hone: ( )	
Date:	E-Mail Addr	ess:	
Position Desired:	Dep	artment:	S
Driver's License No: (If required by position)	State:	Expiration Date	<b>:</b>
Social Security No.:			
APPLICANT'S CERTII	FICATION AND AGRE	EMENT – PLEASE I	READ CAREFULLY
The information I have supplied is true and subject to investigation and confirmation b omissions of fact may preclude or result in already employed.	y the Unified Government.	I understand that any fals	sifications, misrepresentations, or
I agree that the Unified Government may very former employer, educational institution, or information whose disclosure would be expinstitution, or other person or entity who disclosure whose disclosure would be expinstitution, or other person or entity who disclosure whose disclosure when the person or entity who disclosure when the person of th	or other person or entity to di pressly prohibited by statute,	sclose any information re, and release any current	elating to my background, other than or former employer, educational
I understand that any offer of employment beginning employment.	made to me will be subject t	to my passing a physical	examination and drug screen prior to
I further understand that, if employed by the relocate within twelve months of the date of		ast be a resident of Wyan	dotte County, Kansas or be willing to
	Applicant Signatu	ıre	Date
	FOR OFFICE U	JSE ONLY	

	rest in our organization an nd completely. If a question PRINT.						
PERSONAL DATA	A						
Are you legally author upon hire.)	ized to work in the Unite	ed States? Yes	☐ No ☐ (Proo	f of identify a	and eligibility	y will be required	
	een employed by the Uni	ified Governm	ent? Yes 🗌 No				
If yes, when?			Department:				
Are you related to som relative(s)	Are you related to someone who currently is employed by the Unified Government? Yes \(\subseteq\) No \(\subseteq\) If yes, please list relative(s)						
Name:		Departm	nent:				
Name:		Departm	nent:				
EDUCATION AND	) TRAINING						
Highest level completed	d: Less than 8 <sup>th</sup> grade	Less than h	igh school 🗌				
Level	Name and Location	of School	Degree	Earned		Major	
High School/GED							
College/University							
Vocational/Business			Ī				
Other (Specify)							
	ourse work, licenses, or c	certifications r	eceived which y	ou feel better	qualify you	for the position for	
which you are applying	g.						
Typing speed	Shorthand speed		Other office ma	achines			
	have that could help you	u qualify for o			sitions:		
EMPLOYMENT	HISTORY List	below present a	and past employme	ent, beginning	with your mo	st recent employer.	
Name and address of c	ompany and type of	From	To	Starting	Ending	Reason for	
business:		Mo./Yr.	Mo./Yr.	Salary	Salary	Leaving	
			<u> </u>				
		Describe you	ır duties:				
	<del></del>						
	May we contact this employer? Yes $\square$ No $\square$						
Telephone: ( )	<u> </u>						
Job Title:							

Name and address of company and type of	From	To	Starting	Ending	Reason for
business:	Mo./Yr.	Mo./Yr.	Salary	Salary	Leaving
	Describe your	dutios:			
	Describe your	duties			
May we contact this employer? Yes \( \square\) No \( \square\)					
Telephone: ( ) -					
Job Title:					
Name and address of company and type of	From	To	Starting	Ending	Reason for
business:	Mo./Yr.	Mo./Yr.	Salary	Salary	Leaving
	Dogoribo your	/			
	Describe your	r duties:			
<del></del>					
May we contact this employer? Yes No					
Telephone: (					
Job Title:					
Name and address of company and type of	From	To	Starting	Ending	Reason for
business:	Mo./Yr.	Mo./Yr.	Salary	Salary	Leaving
	/	/			
	Describe your	r duties:			
May we contact this employer? Yes No					
Telephone: (					
Job Title:					
N 1 11 0		T.	Gt ti	T 11	D 6
Name and address of company and type of business:	From Mo./Yr.	To Mo./Yr.	Starting Salary	Ending Salary	Reason for Leaving
ousiness.	/	/	Sulary	Salary	Leaving
	Describe your	r duties:			
May we contact this ampleyor? Vos No					
May we contact this employer? Yes No Telephone: ( ) -					
<u> </u>					
Job Title:					
Name and address of company and type of	From	To	Starting	Ending	Reason for
business:	Mo./Yr.	Mo./Yr.	Salary	Salary	Leaving
	/	/			
	Describe your	r duties:			
May we contact this employer? Yes No					
Telephone: ( ) -					
Job Title:					

Are you able to perform the ess accommodation?	ential functions of the position for which you are ap	oplying with or without reasonable
Yes No No		
REFERENCES		
	PERSONAL	
Name	Address	Phone No.
		( ) -
		( ) -
		( ) -
	PROFESSIONAL	•
	(Supervisor, Teacher, etc.)	
Name	Address	Phone No.
		( ) -
		( ) -
		( ) -

The Unified Government of Wyandotte County/Kansas City, Kansas is an equal opportunity employer and will ensure that all applicants are considered for hire without regard to race, color, religion, national origin, sex, age, disability, or veteran status.

Date	Position Title	
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## UNIFIED GOVERNMENT OF WYANDOTTE COUNTY/KANSAS CITY, KANSAS

Equal Employment Opportunity Survey

This information will be immediately separated from your application and will in no way influence your chances for employment with our organization. Completion of this form is voluntary.

GEN	IDER		
1.	☐ male	2.	female
AGE	<u> </u>		
1.	under 18	3.	□ 30 - 39
2.	□ 18 - 29	4.	40 and over
EDU	ICATION		
1.	☐ less than high school	4.	☐ BA/BS degree
2.	☐ high school diploma or GED	5.	vocation or business school
3.	AA degree	6.	college (no degree)
		7.	other
RAC	CE/ETHNIC GROUP		
A.	☐ Hispanic or Latino Male	B.	☐ Hispanic or Latino Female
C.	☐ White Male	l.	☐ White Female
D.	☐ Black or African American Male	J.	☐ Black or African American Female
E.	☐ Asian Male	K.	☐ Asian Female
F.	☐ Native Hawaiian or other Pacific Islander Male	L.	☐ Native Hawaiian or other Pacific Islander Female
G.	American Indian or Alaskan Native Male	M.	☐ American Indian or Alaskan Native Female
H.	☐ Two or More Races Male (Non Hispanic or Latino)	N.	☐ Two or More Races Female (Non Hispanic or Latino)
MAF	RITAL STATUS		
1.	single 2. married 3. widowed	4. 🗌	divorced 5. separated
VET	ERAN STATUS		
1.	yes	2.	no
НОЛ	N DID YOU LEARN ABOUT THIS JOB?		
1.	☐ Walk-In 2. ☐ Unified Government Employee 3. ☐	Frie	nd 4. 🗌 Job Service Center
5.	☐ School 6. ☐ Job Information Line 7. ☐ Newspa	aper (S	Specify.)
8.	☐ Internet (Specify.) 9. ☐ KCKF	PD Fac	cebook (Specify.)
10.	Unified Government HR Facebook (Specify.)		11.
12.	other (Specify.)		



Answers must be printed legibly in blue or black ink.

# UNIFIED GOVERNMENT OF WYANDOTTE COUNTY/KANSAS CITY, KANSAS



### **PARAMEDIC TRAINEE**

#### CANDIDATE PRE-EMPLOYMENT QUESTIONNAIRE

#### **CONFIDENTIAL**

This preliminary questionnaire will be used to evaluate the fitness & qualifications of applicants for employment with the Kansas City, Kansas Fire Department. This questionnaire is to be completed by applicants at the initiation of the employment process or at any time thereafter as requested by the Unified Government or Kansas City, Kansas Fire Department. This document will become a permanent part of your personnel records and may be compared with other phases in the employment process. The Kansas City, Kansas Fire Department is committed to recruiting and employing individuals with the highest degree of integrity and reliability because of the critical nature of the position's responsibilities and the need for secure and confidential handling of sensitive information.

ANY MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS WILL RESULT IN YOUR DISQUALIFICATION OR EMPLOYMENT WITH THE KANSAS CITY, KANSAS FIRE DEPARTMENT SUBJECT YOU TO TERMINATION FROM EMPLOYMENT WITH THE KANSAS CITY, KANSAS FIRE DEPARTMENT.

lame:(Last)	(First)	(Middle)
Address:		
(Number, Street, City, State & ZIP)		
ocial Security Number:	Date of Birth:	
lome Phone Number: ()	Work Phone: ()	
	5.	
Oriver's License Number: ()	State:Expires:	
Form Reviewed by Supervisor:	Serial#:	Date:

\*CONFIDENTIAL\*

Answe	r each ques	tion by circli	ng YES or NO. YES answers require additional information where asked.
1) Hav	e you <b>EVEI</b>	R applied for	any position with the Unified Government?
	YES	NO	
If so, w	hen?		
What p	osition?		
Dispos			
	E COMPLET LECTION PI		OWING BY CHECKING YES OR NO; THESE RESPONSES ARE CONSIDERED SIGNIFICANT IN
Yes	No	_1.	Have you utilized a name other than what you have listed on the employment application? If yes, please explain.
Yes	No	_2.	Do you have a high school diploma or certificate of equivalence (GED)?
Yes	No	_3.	Do you have a valid state driver's license? Which State:
Yes	No	_4.	Aside from your current license have you EVER held a valid driver's license in any othe states? If yes, list those states.
Yes	No	_5.	Do you have an automobile presently registered in your name? What state?
Yes	No	_ 6.	Have you ever pled guilty or been convicted of a crime? If yes, please state the date, jurisdiction, crime charged, disposition of the matter, and any information relevant to the matter.

Yes	No	7.	Have you ever been placed on parole, probation, or diversion? If yes, please state the dates, duration, and nature of same and list the supervising agency.
Yes	No	8.	Do you have any outstanding traffic warrants?
Yes	No	9.	Do you have any outstanding criminal warrants?
Yes	No	10.	Have you ever illegally bought or sold any controlled substance or prescription medication?
Yes	No	11.	Have you ever refused a breathalyzer test or been convicted of a DUI, or do you have any pending charges for a DUI? If yes, what State?
Yes	No	12.	Have you ever been disciplined as a result of a sexual harassment or racial harassment complaint anywhere you have worked? If yes, when and what employer.
Yes	No	13.	Will you be able to establish Wyandotte County residency within one (1) year of your date of hire?
Yes	No	14.	Have you ever stolen from an employer? If yes, explain.
Yes	No	15.	Have you ever been fired or terminated from a job? If yes, explain.

Yes	No	16.	Have you ever been forced to resign from a job? If yes, explain.
Yes	No	17.	Have you ever falsified a time or payroll record? If yes, explain.
Yes	No	18.	Have you ever had your paramedic or EMT certification suspended by the Board of EMS for any reason? If yes, please state the date, the charge, and the duration.
Yes	No	<u>19</u> .	Has a local medical director or medical authority suspended you or denied you permission to practice as a paramedic or EMT in their system? If yes, please state the date, the charge, the jurisdiction and the duration.
Yes	No	20.	Have you ever been disciplined over the provision of medical care? If yes, please state the date, the charge, the jurisdiction, and the discipline imposed.
Yes	No	21.	Have you ever had your driver's license suspended? If yes, please state the date, the charge, and the duration of the suspension

Please complete the following drug usage form. Answer each category with a check mark (do not leave any blanks).

Have you ever used without a prescription or illegally supplied to another any of the following drugs?

	YES	NO	DATE LAST USED	
MORPHINE				
COCAINE				
HEROIN				
METHAMPHETAMINE				
LSD				
MARIJUANA				
PCP				
FORMALDEHYDE				
HASHISH				
PRESCRIPTION DRUGS NOT PRESCRIBED TO YOU				
INHALED SOLVENTS				
OTHER HALLUCINOGENS				
DESIGNER DRUGS (ECSTASY, MDMA, ETC.)				
Comments:				
I hereby certify that there are no material misrepressions. Should any part of my background investigation disclosured that my application will be rejected and I will be disqu	se such	material	misrepresentations or falsifications, I	

Date

Signature of Applicant

Official High School Transcrip Official GED displaying scores Official College Transcripts – Birth Certificate (Original State Valid Driver's License Proof of Certification (Must sh ACLS Certification (MICT's Or DD-214 – Long form which sp Pre-Employment Questionnai	s (Sealed Envelo) if applicable (Sea e Certified Docun now expiration dat nly) pecifies type and i	pe) (IF APPLICABLE led Envelope) nent) (A COPY IS NC te)	OT ACCEPTABLE)	or military service)			
		IN	NFORMAT	ENT OF W ION SHEE IC TRAINE			
NAME: Last:		First:		Middle:			
Previous Residential Addr							
Address	(	City	State/Z	ip Code	From	То	
Have you ever applied f	or a positio	n with the Uni	fied Governr	nent?	YesNo		
Name of Department Or Agency		Date Applied	Accepted Yes or No			If No, Give Reason for Rejection or Declining	
If the answer to the abo	ve question	ı is "Yes", exp	lain reason f	or leaving:			
U.S. Military or Naval Service				Rank			
Dubrana Haarra M		01-1		<u> </u>	rotion Data	<del>.</del>	
Drivers License Numl	ber	State		Ехріі	ration Date	Туре	
Has your license ever been suspended or revoked?YesNo. If "Yes", please explain.							
				•			
Have you ever had a professional license refused or revoked?YesNo If "Yes", please explain.							
Please answer the follo	wina auesti	ons Yes or No	).				

Have you	ever been convicted of an offens	se other than traffic? Yes	or No				
Have you	ever been convicted of a traffic v	violation? (Except parking or	equipment violations) Yes or No				
Have you	ever been convicted of an offens	se under the Uniform Code of	Military Justice? Yes or No				
If the answer to a	ny of the above questions is Yes,	list the information requested	d below.				
Date	Charge	Jurisdiction	Penalty				
Were you ever co	vered by a surety bond in conne	ction with other employment?	Yes or No				
Were you ever covered by a surety bond in connection with other employment? Yes or No  Refused such a bond? Yes or No							
Neiuseu sucii a b	ond: Tes of No						
In the event estimates are made as to dates, please identify them as such in order that they are not inadvertently interpreted as deliberate misrepresentations. Should you need more space to answer a question, please complete it on a separate sheet of paper. It is assumed that the applicant realizes that sufficient inquiry will be made to assure the validity of the information.							
Submit the finished application <b>in person</b> to the Human Resources Department, 701 N. 7 <sup>th</sup> Street, Rm. 646, Kansas City, Kansas 66101 before the closing date. Make certain to bring with you: your driver's license.							
As part of the employment process I agree, consent, and authorize the Unified Government of Wyandotte County/Kansas City, Kansas or it's designee, to conduct a thorough investigation of my personal and professional background including credit, criminal, and driving records and have access to my employment records at my current employer and any employer for which I may have previously worked. I further fully realize and agree that any information which I give the Unified Government of Wyandotte County/Kansas City, Kansas and it's agent(s) is part of my pre-employment screening process and any information which is false will disqualify me from further consideration for employment. I agree to waive any claim or cause of action relating to such release of prior employment records and promise to defend and hold harmless the Unified Government of Wyandotte County/Kansas City, Kansas, it's officers, and employees from any claim or loss arising from such release. I sign this form freely under no threats and/or duress.							
Applicant's Signat	ure		Date				
Witness			Date				