

# Killeen Fire Department

## Fire & EMT Academy Application



**Policy 301**  
**Killeen Fire/EMS Academy & KISD Fire Academy**  
**Operations and Policy Manual**

**PURPOSE AND SCOPE:**

The purpose of the Killeen Fire/EMS and Academy (KFA) and KISD Fire Academy is to train applicants who are qualified to be certified by the Texas Commission on Fire Protection (TCFP) and/or the Texas Department of State Health Services (TDSHS). This policy is established to set standards for the operation of the KFA and the KISD Fire Academy. These standards are derived from the Career and Technology Education Campus Rules, KISD student conduct rules, and the rules established by TCFP and TDSHS. This manual is intended to provide a safe learning environment without interruptions for the KFA and KISD students while adhering to the established policies.

**DENIAL OF APPLICATION:**

Any applicant not meeting the minimum requirements for certification by the applicable agency listed above, shall not be eligible to enroll in the Killeen Fire Academy.

**AMERICANS WITH DISABILITIES ACT (ADA):**

The KFA and KISD Academy shall follow the rules, policies and minimum standards set forth by the Texas Commission on Fire Protection and/or the Texas Department of State Health Services. Applicants shall notify the KFA and/or KISD Fire Academy administrator of any disability upon submitting an application. The administrator shall review with the applicant the job skills required to complete the certification process if accommodation is requested for any disability. The administrator shall check with the appropriate state certifying agency to verify if accommodations are allowed for the applicant's disability.

If the applicable state certifying agency allows accommodations, the KFA will make reasonable accommodations for the applicant. If the applicable state certifying agency does not allow accommodations, the applicant shall be excluded from admission to the academies.

**ANTI-DISCRIMINATION STATEMENT:**

The City of Killeen is an equal opportunity employer and complies with federal, state, and local anti-discrimination laws, regulations, and ordinances. The City does not discriminate in recruitment, selection, placement, promotion, wages, benefits, or other terms and conditions of employment.



**KILLEEN FIRE DEPARTMENT**  
**9200 TRIMMIER RD., KILLEEN TX 76542**  
**(P) 254-501-7884 (F) 254-501-6586**

## **Enrollment Information**

The Killeen Fire Department Academy is now accepting application for the upcoming firefighter class. The classes are designed for individuals to receive their Texas Commission on Fire Protection Structural Firefighter Certification, as well as their Basic Emergency Medical Technician Certification upon completion of the academy.

To apply for the Academy each person needs to complete an application packet, which includes the following documents:

Academy Personal Data Sheet  
Physical Examination Sheet / drug screening  
Criminal History Check

**Note: The Fire Academy will not accept any incomplete application.**

When the (**COMPLETE**) application is returned to the academy, you will be notified of the next steps. Upon your notification from the academy staff member, you will be told to bring in a \$400.00 deposit. The deposit is **non-refundable**. Please submit your non-refundable deposit by **money order**.

### **Tuition Breakdown:**

Non-refundable Deposit (FIRE)	\$400.00
Fire Academy Tuition:	\$3,300.00
Academy t-shirts (2):	Included in Tuition.
Books (AAOS Emergency Care)	Included in Tuition.
Books (Essentials of Fire Fighting)	Included in Tuition.
CPR Course:	Included in Tuition.
EMT-B	\$1,200.00
TCFP Test Fee:	Included in Tuition.
Optional Dorm	\$650.00

Applicant: Please keep this page. Do NOT submit with your application.



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## Personal Data Sheet

### General Information:

Last Name/Suffix: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

DOB: \_\_\_\_\_ Email: \_\_\_\_\_

**High School Diploma:**  Yes  No

**GED:**  Yes  No

### List (2) Emergency Contacts:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Have you ever served in the U.S. Forces?**  Yes  No

If "yes" what branch \_\_\_\_\_ Type of discharge \_\_\_\_\_

If you plan on using your GI Bill benefits, please turn in a copy of your DD Form 214 with the application along with a Certificate of Eligibility.

**Other Information:**

Criminal History Check results

1. A conviction does not mean that you will not be able to attend the Fire Academy.
2. The date of offense, seriousness and nature of the violation, and rehabilitation will be considered.

Have you ever been **convicted**, placed on **deferred adjudication** or **community supervision**, or **plead guilty** or **no contact** to a felony or misdemeanor offense?  Yes  No

If “NO”, skip this section. If “YES”, please answer the following questions about each conviction.

Arrested:      Date: \_\_\_\_\_ Location: \_\_\_\_\_

Result / Probation: Starting Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Jail Sentence: Starting Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Fine: \_\_\_\_\_

Please use a separate sheet if needed and attach to this application.

I understand that this is not an employment agreement between the Killeen Fire Academy and the applicant. I certify that all answers I have provided are true and accurate to the best of my knowledge and belief. I further acknowledge that I have read and understand the questions regarding criminal records, and I have answered these questions truthfully. I understand that I will be required to complete a physical examination, drug/alcohol screening, and criminal history check at my own expense.

\_\_\_\_\_  
Signature

How did you find out about the Killeen Fire Academy? \_\_\_\_\_

**Please only turn in the following:**

- Academy Personal Data Sheet
- Physical
- Drug Screening Results
- Background Check
- DD214 and COE (if using your GI Bill)
- Immunization Records (only if you are attending the EMT course)



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**Physical Evaluation Form**

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

Last 4 of SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Allergies: \_\_\_\_\_

Prior Medical History (list any disease, injury, or deformity that you have or had):

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

HT: \_\_\_\_\_ WT: \_\_\_\_\_ BP: \_\_\_\_\_ T: \_\_\_\_\_ P: \_\_\_\_\_ R: \_\_\_\_\_

Vision: Near \_\_\_\_/\_\_\_\_ Far \_\_\_\_/\_\_\_\_ Field: L \_\_\_\_ R \_\_\_\_

Corrective Eyewear:  Yes  No

	Normal	Abnormal		Normal	Abnormal
Appearance			Back		
EENT			Inguinal		
Heart			Neuro		
Lungs			Skin		
Abd			Joints		

Clear to participate in training program:  Yes  No

\_\_\_\_\_  
 DO  NP  MD  PA  
 Examiner Signature

\_\_\_\_\_  
 Examiner Printed Name

Date of Exam: \_\_\_\_\_

**10 PANEL DRUG SCREENING REQUIRED**



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## **Emergency Medical Technician Basic Immunization Requirements**

Immunizations are ONLY required for the EMT course. You **MUST** turn in your immunization records with the application or by the first day of the fire academy (if attending fire academy). If not, you will **NOT** be able to attend the EMT class.

- MMR (two doses)
- Tetanus (within the last 10 years)
- PPD/TB (within 90 days)
- Hep-B (all three doses; if you are currently receiving the series but have not completed the series please note when you are to receive the remaining doses.)
- Varicella/Chicken Pox (if you have never had chicken pox you need to get the Varicella immunization. If you are not sure whether you had chicken pox, then you will need to get a titer drawn.)
- Flu (during flu season)

Please attach a copy of your immunization record to the application.

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## **Criminal History Check**

In coordination with DPS, the Killeen Fire/EMT Academy uses Identogo to complete the required state and national fingerprint-based criminal history check.

For the nearest Identogo please visit their website at: [www.identogo.com](http://www.identogo.com) or by calling 888-467-2080.

You will need to make an appointment.

Once at the Identogo office, you will be asked for a service code. Provide the service code: 11FFZ6.

We will receive the results electronically, usually within 5 business days. Contact us on or after the 6th business day, Mon-Fri between 8:00am and 3:00pm, to verify we have received the results.

### **Some important notes concerning the new criminal history check program:**

When you provide your fingerprints at Identogo, they will be sent electronically to the Texas Department of Public Safety (TXDPS) and the FBI.

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