

**Spokane County Fire District 10**  
**929 S Garfield Road**  
**Airway Heights, Washington 99001**  
**509-244-2425**

February 5, 2025

To: Candidates for the position of Day Time Staff Captain

From: Assistant Chief Steevens

Subject: Posting for Day Time Staff Captain

District 10 will be hiring qualified staff for the position of District Day Time Staff Captain. This position will be open to internal and external candidates who meet the minimum qualifications as outlined below.

**Application Packet Requirements:**

Promotional application (internal candidates)

Application (external candidates)

Cover Letter

Resume

Current driving abstract (must be dated between December 6, 2024 through February 5, 2025)

Copies of certifications to meet minimum qualifications

**Application packets will be accepted beginning 1500hrs on February 5, 2025, through 1600hrs on February 28, 2025. Late or incomplete application packets will not be accepted.**

Schedule of events: March 4, 2025 – assessment center/panel interviews

March 5, 2025– chief’s interviews

March 5, 2025– offer letters sent

March 26, 2025– tentative start date

**Required occupational qualifications:**

To be eligible to apply and hold a District Day Time Staff Captain position, the applicant must meet the following required occupational qualifications by the close of applications and maintain them. Applicants applying for promotional positions will serve a one-year probationary period.

***District Captain***

- Minimum age of 18 years.
- Possess and maintain a valid state driver’s license

- Must meet minimum qualifications for District Lieutenant
- Must possess an approved EVIP Certification or equivalent
- IFSAC/Pro-Board Fire Fighter I (or equivalent) certification
- Must be certified as a Washington State EMT-B or National Registry
- Must be IFSAC Hazardous Materials level certified
- Must possess NIMNS/NWCG ICS 200 within six months of date of hire
- Must possess NWCG Firefighter I qualification
- NWCG Single Resource Boss – Engine – must be obtained within one year of date of hire
- NWCG IC Type 4 – must be obtained within one year of date of hire
- Must be certified as Fire Service Instructor I
- Hazardous Materials on-scene Incident Commander
- Must have Washington State EMS Evaluator
- IFSAC Fire Officer II within one year

**Salary:** \$8,508.75 per month

**Benefits:** Retirement through Washington State Department of Retirement Services LEOFF II; Department contributes \$75/month toward employee's Medical Expense Reimbursement Plan (MERP); \$100/month toward employee's VEBA account; Medical/Dental/Vision Insurance provided for employee with up to 85% of dependent premium covered by department; Paid Vacation earned at an initial rate of 12 hours per month; Paid Sick Leave earned at an initial rate of 12 hours per month; 132 hours of holiday pay per year.

Completed application packets shall be emailed to [asteevens@scfd10.org](mailto:asteevens@scfd10.org). Incomplete or late applications will not be accepted.

Attachments:

Promotional Application

New Hire Application

Job Description

Release of Information

SPOKANE COUNTY FIRE DISTRICT 10  
**APPLICATION FOR PROMOTIONAL EXAMINATION**

NOTE: All of the questions on this application must be answered in ink in the applicant's own handwriting or typed. A false statement or material omission knowingly made on this application is good cause for exclusion from the eligibility list. If a question is not applicable, mark it "N/A."

I HEREBY MAKE APPLICATION to be examined for promotion to the position of

\_\_\_\_\_ at Spokane County Fire District 10.

1. Name \_\_\_\_\_  
(Last) (First) (MI)

2. Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

3. Phone \_\_\_\_\_  
(Home) (Work) (Cell)

4. E-mail Address \_\_\_\_\_

5. What is your original membership start date? \_\_\_\_\_

6. Do you meet all the occupational qualifications as listed in the job description for the position you are applying? \_\_\_\_\_

THE FOREGOING AND FOLLOWING DECLARATIONS ARE MADE UNDER PENALTY OF PERJURY.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**Spokane County Fire District 10 is an equal opportunity employer and will not base promotional decisions on race, color, sex, sexual orientation, age, national origin, religion, marital status, veteran status, disability, or other protected status.**

Revised 07/28/2016

OFFICE USE ONLY  
DATE RECEIVED



929 S GARFIELD ROAD AIRWAY HEIGHTS WA 99001  
PHONE (509) 244-2425 FAX (509) 244-2421  
www.scf10.org

## CAREER APPLICATION

Dear Applicant:

Thank you for your interest in joining Spokane County Fire District 10. You must complete all sections of this application. Please print clearly or type the required information using black or blue ink.

PROGRAM INTEREST					
Please mark the program you are interested in providing volunteer service with:					
<input type="checkbox"/> Captian					
<input type="checkbox"/>					
<input type="checkbox"/>					
<input type="checkbox"/>					
.					
PERSONAL INFORMATION					
First, Middle, Last					
Address:					
City:		State:		Zip:	
Primary Phone:					
Email Address					
Driver's License Number:		State:			
Are you over 18 years of age?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
How did you learn of this opportunity to provide volunteer services?	<input type="checkbox"/> Website	<input type="checkbox"/> Friend/Relative	<input type="checkbox"/> Open House	<input type="checkbox"/> Other	
IN CASE OF EMERGENCY NOTIFY					
Name:					
Phone:					
Relationship:					
MEDICAL CONDITIONS					
List any allergies or other conditions that could affect emergency treatment:					
List physical or health restrictions that could limit effectiveness as a firefighter:					

**EDUCATIONAL BACKGROUND**

**High School**

<b>Graduated?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>If not, GED?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
-------------------	--	---------------------	--

<b>Name School(s) Attended:</b>	<b>City/State:</b>
---------------------------------	--------------------

**College or Vocational School**

<b>Graduated?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Major:</b>	
-------------------	--	---------------	--

<b>School(s) Attended:</b>	<b>City/State:</b>
----------------------------	--------------------

**EMPLOYMENT HISTORY (List 3)**

List most recent employer first. Include fire and/or U.S. Military Service and volunteer service if applicable. If employment was under a different name, please indicate name.

<b>Employer:</b>	<b>Description of Duties and/or Responsibilities:</b>
<b>Supervisor:</b>	
<b>Address:</b>	
<b>City:</b>	
<b>State:</b> <b>ZIP Code:</b>	
<b>Telephone:</b>	
<b>Position(s):</b>	
<b>Dates of Employment:</b> to	
<b>Reason for Leaving:</b>	

<b>Employer:</b>	<b>Description of Duties and/or Responsibilities:</b>
<b>Supervisor:</b>	
<b>Address:</b>	
<b>City:</b>	
<b>State:</b> <b>ZIP Code:</b>	
<b>Telephone:</b>	
<b>Position(s):</b>	
<b>Dates of Employment:</b> to	
<b>Reason for Leaving:</b>	

<b>Employer:</b>	<b>Description of Duties and/or Responsibilities:</b>
<b>Supervisor:</b>	
<b>Address:</b>	
<b>City:</b>	
<b>State:</b> <b>ZIP Code:</b>	
<b>Telephone:</b>	
<b>Position(s):</b>	
<b>Dates of Employment:</b> to	
<b>Reason for Leaving:</b>	

*If you wish to include additional experience, please attach the above information for each position on a separate sheet of paper.*

**REFERENCES**

List three (3) non-family references:

<b>Name:</b>	<b>Relation:</b>	
<b>Phone:</b>	<b>E-Mail Address:</b>	
<b>Name:</b>	<b>Relation:</b>	
<b>Phone:</b>	<b>E-Mail Address:</b>	
<b>Name:</b>	<b>Relation:</b>	
<b>Phone:</b>	<b>E-Mail Address:</b>	

**QUALIFICATIONS, SKILLS, & TRAINING**

List any Fire/Rescue, EMS, and/or emergency management certifications you currently hold. Include expiration dates and certifying state, department, or agency. Please attach copies of your certifications to this application.

Certification	Certifying State/Department/Agency	Expiration Date

List any special qualifications, skills, certificates, training and/or licenses you hold.

**CERTIFICATION & AGREEMENT**

**This statement must be signed.  
Please read the following statement carefully before signing.**

I understand that any information contained within this application may be verified and that all information obtained as a result of this application is confidential and will be used only for the purpose of determining membership. I understand that if I am accepted by Fire District 10, I may be subjected to drug and/or alcohol testing and/or physical examinations. I agree to keep Fire District 10 informed as to any changes of the information contained in this application (change of address, phone, convictions, traffic violations, etc.) I also understand that false statements or omissions of information will make this application void and may terminate my membership.

*Applicants receiving a conditional offer of employment will be required to undergo and successfully pass a criminal background check. Criminal convictions are not an automatic bar to employment with Spokane County Fire Protection District 10. Considerations include, but are not limited to, the nature of the conviction, when the event occurred, and the relationship between the position applied for and the type of crime.*

Signature of Applicant	Date
------------------------	------

Printed Name of Applicant

**YOUR APPLICATION IS NOT CONSIDERED COMPLETE UNTIL ALL THE FOLLOWING DOCUMENTS ARE RECEIVED:**

- Complete, signed and dated application
- Notarized Authorization to Release Information Form
- Resume and Cover Letter
- Driver's Abstract less than 3 months old



AUTHORIZATION TO RELEASE INFORMATION

To whom it may concern,

I authorize you to furnish Spokane County Fire Protection District #10 with all information that you have concerning me, my work record and my reputation, not prohibited by the Washington State Law against Discrimination RCW 49.60 and regulations concerning Fair Pre-Employment Inquiries. This will include a criminal background check.

Information of a confidential or privileged nature may be included. Your reply will be used to assist Fire District 10 in determining my qualifications and fitness for the position I am seeking with the Fire District.

I further understand that the District may, from time to time, request an updated driving and/or criminal background check and that I am required to inform the District of any driving changes including violations

I hereby release you, your organization and others from any liability or damage, which may result from furnishing the information requested. Please consider copies of this document to have the same power of authorization as an original document.

**DO NOT SIGN OR DATE THIS DOCUMENT UNTIL YOU ARE IN THE PRESENCE OF A NOTARY PUBLIC**

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

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

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

SUBSCRIBED AND SWORN TO before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for the State of Washington Residing at  
Spokane