

Form 4

**MANHATTAN FIRE PROTECTION DISTRICT
PREFERENCE POINT CLAIM FORM AND AFFIDAVIT**

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

A. Experience Preference Points (70 ILCS 705/16.07)

Please state the relevant dates of successful service in the following capacities and attach Firefighter II, Firefighter III and/or Paramedic Certificates; do not include employment with any private company or service even if that employment provided service to a fire district or municipality.

1. **Manhattan Fire Protection District
Basic Operations Firefighter / Firefighter II**

Date of Service (month/date/year): _____ to _____

2. **Full-time or Part-time Firefighter II and/or Paramedic**

Name of Department/District: _____

Address: _____

Phone Number: _____

Date of Service (month/date/year): _____ to _____

Name of Department/District: _____

Address: _____

Phone Number: _____

Date of Service (month/date/year): _____ to _____

B. Veteran's Preference Points (70 ILCS 705/16.06b(h)(i))

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: _____

C. 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: _____

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

Provide proof of residency within the Manhattan Fire Protection District.

E. Paramedic Preference Points (70 ILCS 705/16.06b(h)(4))

Please provide a copy of your Paramedic's license and the following information:

Date first issued (month/date/year): _____

Expiration Date (month/date/year): _____

Please indicate your current resource hospital _____

F. Additional Preference Points (70 ILCS 705/16.06b(h)(7))

Successful completion of apprenticeship program in a trade

Provide proof of currently serving or have served (left in good standing) the MFPD.

STATE OF ILLINOIS
COUNTY OF _____

CANDIDATE'S AFFIDAVIT

I, _____, being first duly sworn on oath, state
Name of Candidate

that the information set forth in my Manhattan 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 was posted:_____

Date of Submission of Claim Form:_____

Received by: _____