

# Join Our Team of Everyday Heroes

Your Career. Your Community. Your Legacy.

## WHY JOIN US?

We're more than just a fire department — we're a tight-knit family committed to excellence, integrity, and growth. As a member of our team, you'll do meaningful work while enjoying outstanding support and benefits you won't find just anywhere.

Whether you're starting your journey or looking for your next big step, this is where passion meets purpose.

When you put on this uniform, you're not just answering a call — you're becoming a lifeline. You're joining a family that's got your back.

### THIS IS MORE THAN A JOB

## UNMATCHED BENEFITS

### BENEFITS THAT WORK AS HARD AS YOU DO

We invest in you — because your growth is our strength.

- Advanced TCFP Courses — taught in-house
- Fire & EMS Continuing Education — always stay sharp
- TIFMAS Deployments — serve across Texas, gain experience
- 48/96 Shifts — work-life balance with long breaks

- 100% Paid Health, Vision & Dental
  - (Employee & Dependents after 90 days)
- Optional Aflac plans & 457(b)
- No Social Security deductions
- Disability coverage (Short & Long Term)
- Longevity Pay + Paid Time Off (after 6 months)
- Retirement through TCDRS (7% with 2.5:1 match)
- Uniforms & PPE Provided

Driver/Operator EMT-B (Probationary)

- Starting Salary: \$64,277.85
- Post-Probation Salary: \$66,188.81
- Compensation: Includes FLSA overtime

Driver/Operator AEMT (Advanced)

- Starting Salary: \$66,883.70
- Post-Probation Salary: \$68,794.67
- Compensation: Includes FLSA overtime

Driver/Operator EMT-P (Paramedic)

- Starting Salary: \$69,489.56
- Post-Probation Salary: \$71,400.53
- Compensation: Includes FLSA overtime

**When you join us, you're not just a number — you're family. And family deserves the tools, training, and time to succeed.**

**Please complete the entire application and mail a copy to:**

**PO BOX 58  
Saint Hedwig, TX 78152**

**Closing date: February 11, 2026**

**For any questions, please call 210-667-1612 and ask to speak with Lawrence Padalecki Jr.**

### Minimum Requirements:

Texas Commission on Fire Protection Basic Firefighter Certification or higher

Texas Commission on Fire Protection Driver Operator

Texas Commission on Fire Protection Aerial Operator

Texas Commission on Fire Protection Basic Wildland Firefighter or NWCG Type II Firefighter Certification

Texas Commission on Fire Protection Instructor I

Texas Commission on Fire Protection Fire Officer 1

NIMS 100, 200, 700, & 800

Texas Department of Health Services EMT-B or higher

Minimum of a Class B Exempt driver license

Courage to Be Safe Course Certificate

Traffic Incident Safety Course

Minimum 2 years as Firefighter rank with paid or combination department or held rank of Driver

### Preferred Requirements:

Texas Commission on Fire Protection Fire Officer 2 or higher (Must obtain within 2 years of employment)

Texas Commission on Fire Protection Instructor 2 or higher (Must obtain within 2 years of employment)

Texas Commission on Fire Protection Intermediate Wildland Firefighter or NWCG Type I Firefighter Certification (Must obtain within 1 year of employment)

Texas Commission on Fire Protection Hazmat Technician

Texas Department of Health Services EMT-I or higher



# Bexar County Emergency Services District No. 12 Employment Application

An Equal Opportunity Employer

## Important Instructions for completing the application:

- Please TYPE or PRINT in INK
- Applications are accepted only for job titles for which recruitment is currently being conducted.
- All information requested must be completed on the application. Incomplete or illegible applications will not be processed.
- This application form and its attachments are official property of the Bexar County Emergency Services District No. 12 and will not be returned, reused or copied for you after being submitted. You should retain a copy of this application for future use or reference.
- Excessive or nonessential attachments will not be referred to the hiring department. Only information necessary to complete the application should be attached. Examples of work, awards, letters, etc., may be taken to interview.
- If more space is needed to give full answers or explanations, attach additional sheets referencing the item number, your name, social security number and job title applied for. Staple attachments to the application.
- Only United States citizens or individuals who are legally entitled to work in the United States are eligible for employment.
- The Bexar County Emergency Services District No. 12 affords equal employment opportunity to all individuals regardless of race, color, national origin, sex, religion, age, qualified disability status or veteran status.
- If you require an accommodation during the application/interview process, please call 210-778-1792.
- Reimbursement for travel expenditures during a testing or interview process is not available.
- Please make sure you meet the minimum qualifications and the application deadline.

## Section A: Answer all questions.

1. Official Job and Title	2. Date of Application		
3. Social Security #	4. Date of Birth		
5. Last Name	6. First Name	7. Middle Name	
8. Mailing Address	9. City	10. State	11. Zip

12. Cell Phone #	13. Home Phone #	14. Email Address
15. Driver's License #	16. State Issuing License	17. Class or Type of License
<b>18. Can you, upon employment, submit documentation verifying your identity and your legal right to work in the United States?</b>		
Yes	No	
<b>19. Check the schedules you are willing to work:</b>		
Other than 9AM-6PM Weekends/Holidays Full Time Part Time		
<b>20. Are you presently employed? If yes, specify where</b>		
Yes	No	Specify:
<b>21. Have you ever been terminated or asked to resign from a previous employer?</b>		
Yes	No	
<b>22. Are you over the age of 18? If yes, can you provide proof of your eligibility to work?</b>		
Yes	No	
<b>23. If you are related to any BCESD 12 employees? If yes, specify names, relationship and department:</b>		
<b>24. Are you able to perform all the essential functions of the job for which you are applying, with or without, reasonable accommodation?</b>		
Yes	No	
<b>25. If you have been employed or attended school under other names, list names and dates of use:</b>		
<b>26. Dates of Military Service</b>		<b>Branch of Service</b>
From:	To:	
<b>Section B: Answer all questions.</b>		
<b>27. Have you ever been convicted of a crime (misdemeanor, felony, or military court martial)?</b>		
Yes	No	
<b>28. Have you ever been placed on probation?</b>		
Yes	No	
<b>29. Have you ever been placed on deferred adjudication?</b>		

Yes	No
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<b>30. Are there criminal charges currently pending against you?</b>	
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Yes	No
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<b>31. For any yes answer to questions 25-29, list type or offense, location and fine or sentenced received. Convictions do NOT necessarily disqualify an applicant from employment consideration.</b>	
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<b>Section C: Education, Certification, Licenses &amp; Additional Skills</b>	
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<b>Do you have a High School Diploma or GED?</b>	<b>Check highest level of completion:</b>			
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Yes	No	Some HS	HS/GED	Some College	Associate
		Bachelor	Master	Doctoral	

<b>College or University Name</b>	<b>From</b>	<b>To</b>	<b>Major</b>	<b>Degree earned</b>	<b>Sem. Hours</b>
1.					
2.					
3.					

<b>License or Certifications</b>	<b>Date Earned</b>	<b>Expiration Date</b>
1.		
2.		
3.		
4.		
5.		

<b>In what language(s) other than English are you proficient?</b>		
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1.	<input type="checkbox"/> Speak <input type="checkbox"/> Read <input type="checkbox"/> Write
2.	<input type="checkbox"/> Speak <input type="checkbox"/> Read <input type="checkbox"/> Write

<b>Additional Skills: List equipment, software, specialized systems or other skills that are related to the job for which you are applying.</b>		
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**Section D:** List jobs in reverse order starting with your most recent job. List your work history for the last 10 years including volunteer, part-time, temporary, self-employment and military jobs. Provide a detailed description of duties preformed. Do NOT substitute a resume for completion of this section. You may attach additional pages in the same format if more space is needed.

<b>Employer</b>	<b>Address</b>	<b>City, State and Zip Code</b>
<b>Job Title</b>	<b>From (Month/Year)</b>	<b>To (Month/Year)</b>
<b>Hourly or Salary Rate</b>	<b>Hours per Week</b>	<b>Reason for Leaving</b>
<b>Supervisor's Name</b>	<b>Supervisor Phone #</b>	<b>May we contact this supervisor?</b>
		Yes   No
<b>Duties:</b>		
<b>Employer</b>	<b>Address</b>	<b>City, State and Zip Code</b>
<b>Job Title</b>	<b>From (Month/Year)</b>	<b>To (Month/Year)</b>
<b>Hourly or Salary Rate</b>	<b>Hours per Week</b>	<b>Reason for Leaving</b>
<b>Supervisor's Name</b>	<b>Supervisor Phone #</b>	<b>May we contact this supervisor?</b>
		Yes   No
<b>Duties:</b>		

<b>Employer</b>	<b>Address</b>		<b>City, State and Zip Code</b>
<b>Job Title</b>		<b>From (Month/Year)</b>	<b>To (Month/Year)</b>
<b>Hourly or Salary Rate</b>	<b>Hours per Week</b>		<b>Reason for Leaving</b>
<b>Supervisor's Name</b>	<b>Supervisor Phone #</b>		<b>May we contact this supervisor?</b>
			Yes   No
<b>Duties:</b>			
<p> </p> <p> </p> <p> </p>			
<b>Employer</b>	<b>Address</b>		<b>City, State and Zip Code</b>
<b>Job Title</b>		<b>From (Month/Year)</b>	<b>To (Month/Year)</b>
<b>Hourly or Salary Rate</b>	<b>Hours per Week</b>		<b>Reason for Leaving</b>
<b>Supervisor's Name</b>	<b>Supervisor Phone #</b>		<b>May we contact this supervisor?</b>
			Yes   No
<b>Duties:</b>			
<p> </p> <p> </p> <p> </p>			

<b>Employer</b>	<b>Address</b>	<b>City, State and Zip Code</b>	
<b>Job Title</b>		<b>From (Month/Year)</b>	<b>To (Month/Year)</b>
<b>Hourly or Salary Rate</b>	<b>Hours per Week</b>	<b>Reason for Leaving</b>	
<b>Supervisor's Name</b>	<b>Supervisor Phone #</b>	<b>May we contact this supervisor?</b>	
		Yes   No	
<b>Duties:</b>			
<b>References: Name</b>		<b>Relationship/ Occupation</b>	<b>Phone #</b>
1.			
2.			
3.			

**Drug Free Work Environment:** Bexar County ESD #12 is committed to providing a safe, efficient, drug-free work environment for all employees. In keeping with this commitment, finalists for all job openings will be required to provide body fluids (blood or urine) to determine the use of alcohol, illegal or controlled substances. Failure of the drug/alcohol screen will result in denial of employment.

**Falsification of Information:** I hereby certify that all statements made on this application and attachments are true and correct to the best of my knowledge and belief. I understand that any false statement, misrepresentation or omission made by me on this application or subsequent interview(s) could cause me to be ineligible for employment or terminated from employment. Further I understand that I am required to abide by all rules and regulations of Bexar County ESD #12.

**Verification of Information:** I authorize Bexar County ESD #12 and its agents to investigate and verify the facts claimed by me on this application. I further authorize my former employers to provide any information requested by Bexar County ESD #12. I understand that employment processing may include a criminal background check, drug screening and/or review of the driving record. I hereby release Bexar County ESD #12 and its agents from all liability in making any investigation and inquiry relative to information contained in the application form.

I understand that nothing in this application or in any prior or subsequent written or oral statement creates a contract of employment or any rights in the nature of a contract. I agree to submit to medical examination and drug screening, if required.

Bexar County ESD #12 participates in all State and Federal law, requiring all employers to verify the identity and employment eligibility of all persons hired to work in the United States. Bexar County ESD #12 will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

I understand that, if accepted, this application does not constitute a contract of employment for any specific period of time. I further understand that all employment is at will and may be terminated by notification from either party at any time, with or without cause, and without prior notice.

**I have read and agree to the above statements**

**Signature:**

**Date:**

## WAIVER AND RELEASE

In consideration of my being permitted to take the Physical Assessment required in connection with my application for the position of Firefighter/Officer, and having been advised that as a part of this assessment, it will be necessary for me to demonstrate my strength, endurance, and physical ability in a series of tests.

I, \_\_\_\_\_ (print name) do hereby release Bexar County ESD # 12 and their respective officials and employees from any and all claims, damages, liabilities, actions and causes of action whatsoever which may occur or arise as a result of any injury or damage that I may sustain as a result of participating in such examinations. I make this release for heirs, my executors, administrators, and myself.

PLEASE COPY THE FOLLOWING STATEMENT LEGIBLY AND IN YOUR OWN HANDWRITING:

**“I CERTIFY THAT I HAVE READ THE FOREGOING WAIVER AND RELEASE AND UNDERSTAND ITS PROVISIONS.”**

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DATE

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SIGNATURE OF APPLICANT

**Volunteers Only**

**Previous Firefighting/ ESO Experience:**

Fire Company \_\_\_\_\_  
Date: \_\_\_\_\_ Rank: \_\_\_\_\_  
Fire Chief's name \_\_\_\_\_ Phone #: \_\_\_\_\_  
Fire Company \_\_\_\_\_  
Date: \_\_\_\_\_ Rank \_\_\_\_\_  
Fire Chief's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Total years involved \_\_\_\_\_

**Health Information:**

Is there any reason that your present health condition would restrict your activities as a firefighter/emergency service provider? [If yes, please explain.]

Do you suffer from any fear/phobias that would restrict your activities as a firefighter/emergency service provider? [fear of height, claustrophobia, etc.]

Name of Person to contact in case of an emergency \_\_\_\_\_

Emergency Phone Number: (\_\_\_\_) \_\_\_\_\_

Beneficiary [Relationship] \_\_\_\_\_

**Background Investigation:**

**(VOLUNTEERS ONLY)**

I agree to permit Bexar County ESD # 12 to conduct an investigation into my background through the Police Department, State Police, FBI, or any other recognized law enforcement organization. This information will be held in confidence by the Bexar County ESD # 12.

Bexar County ESD 12 reserves the right to deny membership to any person if a discrepancy becomes apparent from the information given in this form.

If upon completion of this form and required training is achieved by the applicant, Bexar County ESD # 12 may loan gear and equipment to the individual. It is the understanding by the applicant that this gear/equipment is the property of Bexar County ESD #12 and the applicant may be required to return the gear at the discretion of Bexar County ESD #12 without explanation.