



BUREAU OF LAND MANAGEMENT

FIRE AND AVIATION

(AD)

Casual Hire Application 2025

Late Applications will not be Accepted

FILL OUT FORM COMPLETELY AND LEGIBLY

Check the box of the position/s for which you are applying:

- Firefighter (18 years of age or older)
 Camp Crew (16 years of age or older)
 Single Resource Airbase Dispatch Warehouse Other _____

Name:				Gender:		
	(First)	(Middle)	(Last)	Male <input type="checkbox"/>		
				Female <input type="checkbox"/>		
Valid Driver's License?		<input type="checkbox"/> yes	<input type="checkbox"/> no	If yes, state?		Class: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
Primary Contact Phone #:			Is this a cell phone?			<input type="checkbox"/> yes <input type="checkbox"/> no
Secondary Contact Phone #:			Is this a cell phone?			<input type="checkbox"/> yes <input type="checkbox"/> no
Email address:						
Current Mailing Address:						
City:		State:		ZIP Code:		
Current Physical Address:						
City:		State:		ZIP Code:		
***** ALTERNATE CONTACT *****						
Name:			Relationship:			
Primary Contact Phone #:			Secondary Contact Phone #:			
City:		State:		ZIP Code:		

ADDITIONAL INFORMATION

The position you are applying for is primarily a wildland firefighting or support position.

Supply your most recent work history in the two tables that follow.

Agency/state/department/company			
1. Position:		Fire seasons worked by year (ex; 2003-2005):	
Supervisor:		Supervisor Contact Phone #:	
May we contact your past supervisors?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Agency/state/department/company			
2. Position:		Fire seasons worked by year (ex; 2003-2005):	

Supervisor:		Supervisor Contact Phone#:	
May we contact your past supervisors?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Phone:		Contact Name:	
If applicable, list your current Red Card qualification(s) to the right. Example; ENGB, CRWB, FFT1, FAL3, FFT2, CAMP	1		
	2		
	3		
	4		
	5		
	6		
	7		
	8		
Do you have a current First Aid / C P R card?	<input type="checkbox"/> yes	<input type="checkbox"/> no	Expiration Date: Initial here:
If you are under 21 years old we need your birth date	<input type="checkbox"/> month	<input type="checkbox"/> day	<input type="checkbox"/> year Initial here:
I understand that as a condition of hire, I may be subject to drug testing.			Initial here:
I understand that I may be subject to random drug testing throughout the season, and this is a condition of hire and continued employment.			Initial here:
Conditions of Hire			
WORK CAPACITY TEST (WCT) for Red Card Positions: Certain positions participate in wildland firefighting activities. Based on the type of work performed passing the pack test if required for the position at the appropriate level is a "condition of employment." I understand that I will be required to complete a Medical Exam.			
NOTE: This application constitutes advanced 45-day notification for work capacity testing requirements.			Initial here:
I may be required to fill out a Health Screen Questionnaire (HSQ) through Acuity Medical.			Initial here:
I understand I will be required to have a bank account or other account allowing for direct deposit of funds (Pay Check).			Initial here:
If selected for sponsorship, my dates of availability for the fire season are as follows:	Begin:	End:	
Additional Info:			
I, certify that the information given is true. I understand that employment is not guaranteed. Any misrepresentation may be grounds for non-employment.			

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

If completing form electronically and returning electronically, sign using the following format: /s/ john doe.
Or sign and scan then return by electronic mail.

Applicant Job aide

- You must provide a brief narrative about why you want to be part of this program if this is your first season applying or you were not part of the program last year. This must be submitted with your application use the box below.
- Application deadline is March 7, 2025. **Late applications will not be accepted.**
- Please return application via email to Dan Gustafson dgustafson@blm.gov and Ann Espinoza aespinoza@blm.gov prior to the closing date. If this is your first time applying or you were not part of the program last year a brief narrative is required.
- Anyone selected for a AD position must have a working email account.
- If you are selected the majority of AD training and on-boarding will be held on weekends to allow for school and work commitments.
- As a reminder IS-100.c & IS-700.b training certificates from the classes must be on file with the BLM Training Officer. Casual Hires only need to complete this once if I have your certificate on file.

You will need to complete two FEMA (Federal Emergency Management Agency) classes, ICS-100.c: Introduction to the Incident Command System and IS-700.b: Introduction to National Incident ManagementSystem. **This must be completed prior to your training day.**

- FEMA classes needed are online at <https://cdp.dhs.gov/femasid/register>. You will need to register for a Student ID number before starting the classes. Once you have your SID number you will need to take the following FEMA classes.
- ICS-100.c (2 hours) <https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c&lang=en>
- IS-700.b (3.5 hours) <https://training.fema.gov/is/courseoverview.aspx?code=is-700.b&lang=en>
- After you complete each of the two classes print off your certificates and email them to dgustafson@blm.gov .You will also want to keep a copy for your records.

Narrative area:

Checklist	Yes	No	NA
Correct Contact Information supplied.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resume supplied.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Training Certificates supplied.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Confirmed your application is on file with Ann Espinoza.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Postal mail or drop off to:

Ann Espinoza
 Bureau of Land Management
 Carson City District Office
 5665 Morgan Mill Road
 Carson City, Nevada 89701

Email to:

aespinoza@blm.gov
dgustafson@blm.gov

Questions contact:

Ann Espinoza 775.885.6196
 Dan Gustafson 775.291.0437