



Green Pond Fire Department
New Member Application



Last: _____ First: _____ Middle: _____

DOB: _____ SSN: _____ E-mail Address: _____

Street Address: _____ City: _____

Zip Code: _____ Contact Number: _____

Are you at least 18 years or older? Yes: ____ No: ____ Active Military service? Yes: ____ No: ____

Driver's License Number: _____ Driver License Expiration: _____

Are you a veteran? Yes: ____ No: ____

Have you been arrested in the past three years? Yes: ____ No: ____

Education

High School or GED: _____

Highest Grade Completed: _____

College: _____

Degrees or Certifications: _____

Firefighting and/or EMS Experience

Where? _____

Certifications or Licenses: _____

Briefly describe why you are wanting to join this organization: _____

References

(Must be business or acquaintances and not relatives)

Name: _____

Address: _____

Phone: _____ Cell: _____

Years Known: _____

(OVER)

(References continued)

Name: _____

Address: _____

Phone: _____ Cell: _____

Years Known: _____

Emergency Contact

(Will be documented in your file for emergency use only)

Name: _____

Address: _____

Phone: _____ Cell: _____

Relationship: _____

Agreement

I, _____, consent for a pre-employment drug screen, MVR (motor vehicle record), and background check. I agree that the information I have provided is correct. Any falsification of documents will result in dismissal of the application. If employed with the Green Pond Fire Department, I understand that I may be asked to submit to a random drug screen upon request of a fire officer or executive personnel of the department. I also agree to return any PPE or issued uniform's upon resignation or department dismissal.

(Print Full Name)

(Date)

(Signature)

(Witness Print Name)

(Date)

(Witness Signature)

ALL APPLICATIONS MUST BE TURNED IN WITH A COPY OF A CURRENT DRIVER'S LICENSE, CPR CARD, AND EMS LICENSE, IF APPLICABLE.