

**Wellington-Napoleon
Fire Protection District
Application for Membership**

We welcome you as an applicant to be a volunteer firefighter. Your application will be kept on file and considered with others for the position of volunteer firefighter for a period of one year following the date of the application. The Wellington-Napoleon Fire Protection District is committed to the policy that all persons have equal access to its programs, services, activities, facilities and membership without regard to race, color, creed, religion, national origin, sex, disability, age, marital status, sexual orientation or status with regard to public assistance.

Please furnish us with complete information. An incomplete application may reduce your opportunity with the Wellington-Napoleon Fire Protection District. You are encouraged to attach any additional information which you believe qualifies you for the position. Materials submitted in support of an application are normally not returned. You should not submit an original document if it is your only copy.

PERSONAL INFORMATION Please print legibly in ink Date of application _____

Name (Last/First/Middle)		
Current Address (Street/PO Box)		
(City/State/Zip)		
Home Phone (Area Code)	Work Phone (Area Code)	Other Phone (Area Code)
What is the best time to contact you?	May we contact you at work?	
Position Applying For: _____ Firefighter _____ Firefighter/EMT _____ EMS Only		

PERSONAL DATA

Nickname/Preferred Name _____
Are you at least 18 years of age? () Yes () No If no, please state your age _____
Occupation _____
Drivers License # _____ State _____ Type _____
Has your Driver's License ever been suspended? () Yes () No
If yes, explain giving dates, etc. _____ _____ _____

Name (Last/First/Middle)

Social Security Number

MEMBERSHIP

Date Available_____ Are you employed now? () Yes () No
Current Working Hours From _____ am or pm To _____ am or pm
When not working, I would be available for calls (check one) ()25% ()50% ()75% ()100%
May we contact your present employer? () Yes () No
Have you previously applied for or been a member of the Wellington-Napoleon FPD ()Yes ()No
If yes, dates_____

EDUCATION

Name of last high school attended:_____
Address:_____
Grade Completed:_____
Name of college or university_____
Address:_____
Number of credits/degrees received:_____
Other relevant training that should be included in your fire service file_____

Number of credits/degrees received:_____
Special skills, interests or hobbies:_____
Foreign languages spoken or read:_____

Name (Last/First/Middle)

Social Security Number

EMPLOYMENT

Current Employer _____	
Address _____	
Phone # () _____	Dates Employed: From: _____ To _____
Previous Employer _____	
Address _____	
Phone # () _____	Dates Employed: From: _____ To _____
Previous Employer _____	
Address _____	
Phone # () _____	Dates Employed: From: _____ To _____

REFERENCES

READ CAREFULLY: List as character references three persons you have known for at least three years and who are not related to you. May not be past employers.	
Name _____	Address _____
Phone # () _____	Occupation _____
Name _____	Address _____
Phone # () _____	Occupation _____
Name _____	Address _____
Phone # () _____	Occupation _____

Name (Last/First/Middle)

Social Security Number

FIRE/RESCUE & EMS EXPERIENCE

Have you ever served in another fire/rescue or EMS department? () Yes () No

If yes complete the following:

Name of Department _____ Phone # () _____

Address _____ Dates of Service _____

List types of fire/rescue/EMS vehicle(s) you have been authorized to drive(i.e. ambulance, fire engine etc)

List the highest rank you have held _____

List any fire/rescue/EMS or related courses you have taken and where/how obtained: (i.e. Fire Fighting I & II, Emergency Medical Technician, etc.) (Name of school, course, etc.)

(a) _____

(b) _____

(c) _____

(d) **Fire/Rescue/EMS Reference:** (Chief's Name) _____

Fire/Rescue/EMS Department: _____

Address & Phone No: _____

Name (Last/First/Middle)

Social Security Number

CONVICTION INFORMATION

Have you ever been convicted of a misdemeanor, a felony or other violation of law that has not been annulled, expunged, set aside, purged, sealed or dismissed? () Yes () No

If yes, explain the nature of the charge and the circumstances: _____

Have you ever been known by another name or combination of names? () Yes () No

If yes, give names _____

Have you ever had a driving violation, DUI or DWI? () Yes () No

If yes, date of incident: _____ City/County of occurrence: _____

IMPORTANT FACTS FOR YOU TO KNOW CONCERNING YOUR APPLICATION

Information requested on your application that is defined by State Statute as public may be released on request and includes: job history, education and training, relevant test scores, and work availability. If you are selected as a finalist for a position, your name will become public information. Other information will be considered private and will be used only in conjunction with your possible acceptance.

READ and SIGN

I authorize investigation of all statements contained in this application as may be necessary to arrive at a decision. I certify that all answers to the above questions are true and understand that any false information on or omission of information from this application (including any additional information required for public safety applicants) may be cause for rejection of this application or termination of membership status. If a member of the Wellington-Napoleon Fire Protection District, I authorize (with Fire Board Approval) the Fire Chief or his/her designee to complete a background check at any time. Moreover, I hereby release the Wellington-Napoleon Fire Protection District and any agent acting on its behalf from any and all liability of whatsoever nature by reason of requesting such information from any person.

X _____
Applicant's Signature **Date**