

Deepwater Fire Department Membership Application

Office Use Only
Member approved by DFD:
Join/Start Date:
Relief Assoc App Filled out:
Relief Physical complete date:
App to Twp Committee date:
Twp Acceptance date
Relief app to Assoc President Date:
Member 's Relief Assoc Line Number:

Please provide a copy of your valid driver's license when returning this application...

Name:		Da	te:			_
Address:		City:		State:	_ Zip	:
Telephone #s: Ho	ome: ()		Mobile: ()		
Applicant's Emai	il Address:					
Date of Birth						
	<u>School # o</u>		ional Informat ded Diploma or D			
Elementary						
High School						
College						
Other						
Will you be able accommodation?	e to perform the	essential job	o functions with		out a ro Yes	easonable □No
Do you have any	y misdemeanor or	felony convi	ctions pending?		Yes	□No
Have you ever b	been convicted of	a misdemean	or or felony offen	se? [] Yes	□No
Please List belo	ow:					

Misdemeanor, felony or traffic convictions/offenses do not necessarily exclude you from membership on the Deepwater Fire Department.

<u>References</u>

List three persons not related to you, whom you have known at least one year.

Name	Address	Years Acquainted	Telephone #

Employment

List three employers, starting with the most recent.

Date Month and Year	Company Name City	Supervisor	Telephone #
From: To:			
From: To:			
From: To:			

What is your normal work schedule? Shift What hours are normal for your work

schedule? (Ex: 0700-1500) _____

Fire & Rescue Experience

Date Month and Year	Fire Department and/or Company Name	Company Officer Contact	Telephone #
From: To:			
From: To:			
From: To:			

List any *FIRE/EMS* related credits, diplomas, degrees or certificates earned:

I am interested in attending Firefighter training.

Briefly state your reasons for wanting to join the Deepwater Fire Department.

How did you become interested in the Deepwater Fire Department?					
🗖 Friend	DFD Member	□ Newspaper	□Other		

If I am accepted into membership, I agree to sign for and be held responsible for such articles of equipment and supplies as are listed and signed for on my equipment record and agree to care for this equipment to the best of my ability.

If for any reason my membership with the Deepwater Fire Department is terminated, I agree to return in serviceable condition any and all such equipment as is listed and on my equipment record.

I agree to perform all reasonable orders of the Commanding Officer(s) and staff while on duty with the Deepwater Fire Department, and will conduct myself in a professional manner at all times.

I will submit to a complete physical examination, as required, at the expense and clinic of choice, of the Deepwater Fire Department.

I acknowledge that a full background check may be run through the Local Authorities as relates to any police records and/or driving records.

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am a member, my membership may be terminated at any time.

In consideration of my membership, I agree to conform to the fire departments rules and regulations, and I agree that my membership can be terminated, with or without cause, and with or without notice, at any time, at either my or the department's option.

I also understand and agree that the terms and conditions of my membership may be changed, with or without cause, and with or without notice, at any time by the Deepwater Fire Department.

Deepwater Fire Department is an Equal Opportunity Employer. We do not discriminate in recruiting, interviewing, hiring, training, length of service, compensation, benefits, promotion, demotion, transfer, layoff, discipline, discharge or other terms conditions, or privileges of membership because of an individual's race, color, age, sex, religion, national origin, disability, sexual preference, or veteran or current military status. It is our policy to employ and promote those applicants and members who are best suited for the position and possess the necessary skills, education, experience and qualifications.

Signature of Applicant

Date of Application