



# Polson Rural Fire District



## Application for PRFD Volunteer Firefighter

Date of Application: \_\_\_\_\_

### Personal Information

Name Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ over 18 years old    ☐ Yes    ☐ No

Male ☐ Female ☐ Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_

Please attach a copy of Driver's license with completed application

Commercial ☐ Yes ☐ No    Date of Expiration: \_\_\_\_\_

We welcome you as a Volunteer Firefighter Applicant. It is the policy and intent of Polson RURAL Fire District to provide equality in opportunity in employment of all persons. This policy prohibits discrimination because of race, color, religion, national origin, political affiliation, disability, marital status, sex, or age in all aspects of our personnel policies, programs practices, and operations. All information contained in or connected with this application will be considered personal and confidential and used only in conjunction with your possible affiliation by Polson RURAL Fire District.

## Desire to Serve & Courage to Act!



# Polson Rural Fire District



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## Work History

Are you Self Employed: ☐ Yes ☐ No

1. Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Start date: \_\_\_\_\_ End or present date: \_\_\_\_\_

2. Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Start date: \_\_\_\_\_ End or present date: \_\_\_\_\_

3. Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Start date: \_\_\_\_\_ End or present date: \_\_\_\_\_

Military Service ☐ Yes ☐ No Type of Discharge \_\_\_\_\_



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## Education

High School Diploma or GED ☐ Yes ☐ No    College Attended ☐ Yes ☐ No

Name of  
School(s): \_\_\_\_\_

Other Schools Attended: \_\_\_\_\_

\_\_\_\_\_

Fire Service Experience: \_\_\_\_\_

Are you a resident of Polson RURAL Fire District: ☐ Yes ☐ No

Are you A U.S. Citizen: ☐ Yes ☐ No

## References

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_



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## History

Have you ever been convicted of a felony: ☐ Yes ☐ No

If Yes please explain: \_\_\_\_\_

\_\_\_\_\_

A conviction WILL NOT necessarily disqualify an applicant from employment.

Social Security Number: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

## Acknowledgement

The Fire Service places great demand and requires you to carry, lift, climb, crawl, stoop, and bend. Do you have any limitations that would prevent you from performing these duties?

☐ Yes ☐ No

If Yes please explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever received Workers Compensation: ☐ Yes ☐ No

If yes please explain: \_\_\_\_\_

\_\_\_\_\_

Do you have special requirements or needs that would need to be met by PRFD as a Volunteer Firefighter: ☐ Yes ☐ No

If yes please explain: \_\_\_\_\_

\_\_\_\_\_



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## Agreement

I hereby certify that this application contains no misrepresentations or falsifications and that the information given is true and complete to the best of my knowledge and belief. I understand that misrepresentation or omission of facts called for in this application is cause for cancellation of the application and/or dismissal. I authorize the Polson RURAL Fire District to make any necessary and appropriate investigations to verify the information contained herein.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## Approval

Polson Rural Fire District Chief Recommendation: ☐ YES ☐ NO

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Chief's Signature: \_\_\_\_\_

Polson Rural Membership Committee Approval:

Firefighter: \_\_\_\_\_ ☐ YES ☐ NO Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Firefighter: \_\_\_\_\_ ☐ YES ☐ NO Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Officer: \_\_\_\_\_ ☐ YES ☐ NO Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

**Rural Fire District Board Approval:** ☐ YES ☐ NO

Approval Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Board Chair Signature: \_\_\_\_\_



**Signature:**\_\_\_\_\_