DOYLE FIRE DISTRICT #1

MEMBERSHIP APPLICATION

PLEASE SELECT COMPANY

☐ Doyle Hose Co. #1 - 2199 William Street ☐ Doyle Hose Co. #2 - 100 Willowlawn Pkwy

Please check all of the positions for which you intend to become qualified and perform:

☐ Interior ☐ EMS Only ☐ Duty Shift ☐ Junior Firefighter (13-17 years of age)

APPLICANT INFORMATION

Name: _____

Residence Address: _____ City: _____ State: _____ ZIP: _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Phone No.: _____

How long have you lived at your present address? Years _____ Months _____

If less than 2 years, list prior addresses for the last two years:

Address _____ From _____ To _____

Address _____ From _____ To _____

Do you intend to reside in the Fire District area for the next few years? ☐ Yes ☐ No

If no, please explain why not? (college, etc.)

_____

_____

Are you at least sixteen years of age? ☐ Yes ☐ No

Do you possess a valid N.Y.S. driver's license? ☐ Yes ☐ No

EMPLOYMENT INFORMATION

Name	Address	Position	Dates of Employment

Do you have access to a vehicle to permit you to respond to the station? ☐ Yes ☐ No

TRAINING / EDUCATION / PRIOR SERVICE

Relevant certifications, courses, trainings (include expiration dates, if any):

_____

_____

Highest grade/level of education completed: _____

Have you previously belonged to another fire department or ambulance service? ☐ Yes ☐ No

If so, provide name, address and years of service:

_____

ELIGIBILITY & BACKGROUND

Are you a citizen of the United States? ☐ Yes ☐ No

If not, do you intend to become a citizen of the United States? ☐ Yes ☐ No

If no, have you the legal right to remain permanently in the United States? ☐ Yes ☐ No

Do you intend to remain permanently in the United States? ☐ Yes ☐ No

Have you ever been convicted or plead to a criminal offense? ☐ Yes ☐ No

Provide offense convicted of: _____

Date of conviction: _____

How long ago was the conviction? _____

Has a certificate of relief from disabilities been obtained? ☐ Yes ☐ No

Have you ever been convicted of either of the following types of offenses?

Arson or attempted arson in any degree ☐ Yes ☐ No

An offense requiring registration as a sex offender ☐ Yes ☐ No

Do you have any pending arrests? ☐ Yes ☐ No

Have you reviewed the requirements for the position which you are interested? ☐ Yes ☐ No

Can you perform the functions of at least one of the positions in which you are interested, with or without reasonable accommodation*? ☐ Yes ☐ No

(Please see the attached list of physical requirements)

* The Fire Department reserves the right to determine what is reasonable.

REFERENCES

Please provide three individuals who will share information regarding your potential service as a member of the fire department:

Name	**Address**	**Phone**

AGREEMENT FOR BACKGROUND CHECK

I, the above signed applicant, hereby consent to a criminal background check and to review of my information as may be publicly posted on social media. I understand that this information will be utilized in the review of legal grounds for consideration of membership only but could result in denial of membership for legal reasons only.

Signature: _____ **Date:** _____

APPLICANT SIGNATURE

I hereby attest that the above answers are true to the best of my knowledge and may be relied upon in consideration of my application.

Name/Signature: _____ **Date:** _____

PARENTS APPROVAL (UNDER 18 YEARS OF AGE)

I, _____ parent or guardian of _____

an applicant for Active-Junior Membership in the Company, hereby consent to their applying for membership.

I understand that membership in a fire company can have serious risks of harm, both during training and live operations.

I am not aware of any reason that they would not be able to adequately and competently perform as an Active Member.

Dated: _____ **Name/Signature:** _____ **Relationship:** _____