

Newdale Volunteer Fire Department 98 River Walk Drive Burnsville, NC 28714

Application for Membership (Please print legibly)

Full Name:		Date:				
Physical Addre	ss:					
City:		Stat	e:Zip	:		
Email Address:						
Home Phone:	one:Work Phone:					
Cell Phone:	ll Phone:Pager:					
Date of Birth: / Are you 18 years of a						
Blood Type:		Social Security Number:				
Driver's License Number:		State:	Class:			
	Edu	ucation and Training				
Schooling	Name, City and State		Year Completed	Graduated		
High				Y/N		
College				Y/N		
Other				Y/N		
Degree(s) List any Fire R	escue Emergency Medical	Training, or Other Experienc	e:			
	eseae, Emergeney mearcar	Training, of Other Experience				
Any mechanica	l, electrical or other special	ized work experience?	YES NO			
If so, please exp	plain:					

Employment History

Present Employer: Superv Address: Phone: ob Title: Date E Total Years Employed: Workin Opecific Duties: Workin Opecific Duties: May we contact your employer? YES NO Military S Please list your Military Service if applicable: Branch of Reserve Status: Attendance requirements if in the Reserve or Guard: Referen References-please list three references that are not relate Name: Add Phone: Add	nployed:g hours:
ob Title:	nployed:g hours:
Yotal Years Employed:	g hours:
And the provided and th	•rvice Service:
May we contact your employer? YES NO Military S Please list your Military Service if applicable: Branch of Reserve Status: Attendance requirements if in the Reserve or Guard: Referen References-please list three references that are not relate Name: Add Phone: Add	rvice Service:
Military S Please list your Military Service if applicable: Branch of Reserve Status: Attendance requirements if in the Reserve or Guard: Referen Referen Referen Referen Add Please list three references that are not relate Name: Add Name: Add	Service:
Please list your Military Service if applicable: Branch of Reserve Status:	Service:
Reserve Status:	ces
Attendance requirements if in the Reserve or Guard:	ces
References References References Name: Add Wame: Add Name: Add	ces
References-please list three references that are not relate Name: Add None: Add Name: Add	
Name: Add None: Add Name: Add	to you.
Name: Add None: Add Name: Add	-
Phone: Add	ess:
honor	ess:
hone:	
Name: Add	ess:
Phone:	
Emergency	Contacts
Jame Phone Number	Relationship
	Termionomip

Criminal Background Check

Prospective members shall undergo a criminal background check. The background check shall be sent to the appropriate law enforcement agency shortly after being submitted by the applicant. If a background check elicits any offenses (with the exception of minor traffic infractions) the applicant will be offered the opportunity to explain the conviction to a review committee. If the applicant declines this option, the application will be declined. If the applicant agrees to the review, the committee will review the offense and will decide to either accept or decline the application.

List any Criminal Convictions or Traffic Violations

Release

The information that I have provided in this application is true and correct to the best of my knowledge. Falsification of any information within this application shall be grounds for my dismissal. I authorize the Newdale Volunteer Fire Department to contact the personal references and present / former employers.

Signed the______, 20______,

Signature _____

FOR OFFICE USE ONLY									
Date Received:									
Background Check Returned: Clear: Y / N									
Fire	EMS	Junior	Auxiliary	Board					
Official Start Date:	En	nployee #:		_ Radio #:					
Employee Information	Form SBT	Added to Firehou	se Memb	er Folder	Chief Folder				
Key Risk Insurance	NCSFA Roster	NCREMS Ros	ster Depai	tment Roster	NM Packet				