Urbana Volunteer Fire & Rescue Inc.

Membership Application

Dear Perspective Member,

Thank you for your interest in the Urbana Volunteer Fire & Rescue Department.

Attached you will find the membership application. Please fill it out carefully, completely and legibly.

Return your completed application in one of the following ways:

Mail to: Membership Committee Urbana Volunteer Fire & Rescue 3602 Urbana Pike Frederick MD 21704

Email to: <u>membership@urbanavfd.org</u>

In person: Drop off at address listed above

If you drop off your application at the station, please put it in a sealed envelope labeled "Membership Committee". A member of the Membership Committee will contact you to schedule an interview. Membership applications will be presented at the company meeting which is held the first Thursday of every month. You will be notified of your acceptance or denial of membership by mail.

Once again, thank you for your interest and we look forward to working with you in the future.

Sincerely,

Membership Committee

01/23

URBANA VOLUNTEER FIRE & RESCUE, INC.

Application for Membership

Membership classification: (for committee use only) ____ Active ____ Administrative ____ Junior

Please fill out this application completely and legibly. Failure to provide all information requested may delay the application process. If you have any questions, please send an email to membership@urbanavfd.org someone from the membership committee will call or email you.

PERSONAL INFORMATION									
NAME: Last	First Middle		2		DATE OF BIRTH		AGE		
ADDRESS: Number & Street					CITY			STATE	ZIPCODE
HOME PHONE	WORK PHONE		CELLI	CELL PHONE E-MA		E-MAIL AD	AIL ADDRESS		
EMPLOYER			OCCUP	ATION					
SUPERVISOR		EMPLOYER PHONE	NUMBER			MARITAL S	TATUS		
PLACE OF BIRTH	U.:		IF NOT A C LEGAL RES		,	MAIDE	en name (if	applicable)	
EDUCATION High school Diploma? YES	_ NO	COLLEGE Degree?				HOW DID YOU HEAR ABOUT UVFD?		VFD?	
PERSON TO CONTACT IN CASE OF EMERGENCY CONTACT'S RELATI		TIONSHIP	TO YO	U	CON 1. 2.	TACT'S PHOI	NE NUMBER	.(S)	
CONTACT'S ADDRESS									

FIREFIGHTER/EMT TRAINING

ENTER BELOW ALL FIREFIGHTER, EMT, PARAMEDIC OR OTHER APPLICABLE FIRE/RESCUE SERVICE TRAINING (Use extra page if necessary)					
Type of certification	Date received	te received Expiration date Jurisdiction in which received Additional remark		Additional remarks	

PERSONAL REFERENCES

The UVFD Membership Committee Chairman will contact each of these references by telephone. These persons should not be related to you,					
but should be able to comment on your Fire Service experience, character, etc. PLEASE PROVIDE AT LEAST 3 PERSONAL REFERENCES.					
NAME	PHONE NUMBER AND EMAIL ADDRESS	RELATIONSHIP TO APPLICANT			

GENERAL INFORMATION

Have you ever been an applicant or member UVFD or <u>any</u> other fire dept. or rescue squad? If yes, please provide information below. Use an extra page if necessary.				YES	NO		
NAME OF DEPARTMENT	CONTACT INFORMATION	CONTACT INFORMATION CHIEF/PRESIDENT			DATES OF SERVICE		

SPECIAL SKILLS OR TALENTS

In the space below – list any special skills or talents you may have beneficial to Urbana Fire and Rescue, Inc.

Have you ever been convicted of a felony? [YES] [NO] If [YES], please identify:

Date	Offense	Outcome
Date	Offense	Outcome

SIGNATURE

I hereby certify that all the information provided on this application is truthful and accurate to the best of my knowledge and ability. I understand that each statement will be investigated. Any inaccurate, falsified or misleading statement or answer may result in rejection of this application or dismissal from the department. I authorize Urbana Volunteer Fire & Rescue, Inc. (UVFD) representatives to contact by telephone or personal interview or in writing the persons listed as references on this application and to confidentially gather and maintain their evaluations of me with respect to my character and fitness for the position for which I am applying.

Applicant's Signature

Date of Application

Parental Signature (if under 18 years of age)

Date of Parental Signature

URBANA VOLUNTEER FIRE & RESCUE, INC.

3602 URBANA PIKE FREDERICK, MARYLAND 21704

NON-HARASSMENT POLICY

POLICY:

The Urbana Volunteer Fire & Rescue Inc. is committed to providing all volunteer members with a company that is safe, comfortable, and free from harassment. The Company will not tolerate harassment of any type. Harassment is offensive, unwelcome physical or verbal behavior. It can include comments or conduct related to a person's race, color, national origin, religion, sex, sexual orientation, age disability or veteran status. Sexual harassment, which is unwelcome sexual advances and other sexual behavior, is also prohibited.

PROCEDURES:

- 1. The company is opposed to and prohibits harassment of any member at the fire department by another member of the fire department. Every attempt must be made to halt any harassment of which the Board of Directors is aware by first calling attention to this policy and then by taking more direct corrective action as necessary.
- 2. All Board of Directors are responsible for creating a hostile-free fire department and enforcing this policy.
- 3. The Company's Non-Harassment Policy must be posted on the bulletin board in the watch office at all times.
- 4. Any member who is subjected to harassment should report all such incidents directly to the President of the Fire Department or any member of the Board of Directors. The member will be informed that the information can be kept **CONFIDENTIAL**, and that there will be no reprisal or retaliation taken against persons who raise concerns about harassment. The member will also be informed that an investigation of the alleged harassment will be conducted and that, if warranted, appropriate corrective action will be taken. However, no disciplinary action will be taken without a thorough investigation of the facts, which should include a written statement from the member describing the offensive or unwelcome behavior.
- 5. Based on the facts obtained, disciplinary action will be taken on a case-by-case basis with potential for immediate dismissal of the appropriate member.

I HAVE READ THE ABOVE NON-HARASSMENT POLICY, UNDERSTAND THE POLICY, AND AGREE TO ABIDE BY THIS POLICY

Signed: _____

Date: _____