

Ellsworth Volunteer Fire Department

The Fighting 38th

20 South Main Street
Post Office Box 512
Ellsworth, PA 15331
724-239-2227

Membership Request

Please complete all information that is requested. If a question does NOT apply to you answer with "NA"

Type of Membership

Firefighter(18 years or older)_____ Social(14 years or older)_____ Junior Firefighter(14-17 years old)_____

Personal Information

First Name_____ Middle Initial_____ Last Name_____

Date of Birth_____ Age_____ Are you a High School Student? Y___ N___

Current Address_____

City_____ State_____ Zip Code_____

Telephone Number_____ Cell_____

Drivers License number_____ State of issue_____

Experience

Are you currently a member of any other fire department?Y___ N___

If so, provide the following: Station Name_____

Chief's Name and Telephone Number_____

Are you a former member of any other fire department?Y___ N___

If so, provide the following (attach an additional page if more then one department)

Station Name_____

Chief's Name and Telephone Number_____

List all current certifications (attach copies also)_____

Current Employer

(if employed for less then (2) years attach additional pages of all employers, supervisor names and phone numbers for the past 2 years)

Company Name _____

Supervisor name and phone number _____

References

Please provide 3 non-family member references

Name _____ Phone Number _____ - _____ - _____ Years Known _____

Name _____ Phone Number _____ - _____ - _____ Years Known _____

Name _____ Phone Number _____ - _____ - _____ Years Known _____

Background Information

Have you ever been convicted of a crime, including traffic violations? Y _____ N _____ if so, please explain and include dates _____

Have you ever used illegal drugs? Y _____ N _____ if so, please explain and include the date of last use _____

Have you ever had your drivers license revoked or suspended for any reason? Y _____ N _____ if so, please explain _____

Have you ever been suspended or expelled from any other fire department? Y _____ N _____ if so, please explain _____

Vehicle Information

(if you will use a courtesy blue light, 18 years of age or older. Attach additional pages if needed)

Year _____ Make _____ Model _____ License Plate Number _____

Understandings

Please **initial** all lines.

_____ I understand that my references will be called to gather information on myself to help determine suitability for membership in the Ellsworth Volunteer Fire Department.

_____ I understand that I am subject to a criminal background check to help determine suitability for membership in the Ellsworth Volunteer Fire Department.

_____ I understand that I am subject to a Department of Motor Vehicle Record check to help determine suitability for membership in the Ellsworth Volunteer Fire Department.

_____ I understand that if accepted for membership that I will receive property of the Ellsworth Volunteer Fire Department, and when terminating my membership the property will be due back to the Ellsworth Volunteer Fire Department with in 10 days of termination or legal action will be taken.

_____ I understand that if accepted for membership I will be required to participate in fund-raising events, including but not limited to selling of tickets, working fund-raising events and fund drives.

_____ I understand that if accepted for membership as a firefighter I must participate in training sessions to ensure the safety of myself, the safety of fellow firefighters, and the safety of the community

_____ I understand that if accepted for membership I will be on a probationary status for the period of one year, in which my membership may be terminated, for any reason, by the members of the Ellsworth Volunteer Fire Department.

_____ I understand that the Ellsworth Volunteer Fire Department does not discriminate on the basis of race, color, national origin, sex, sexual orientation, religion, age or disability, for any reason at all

_____ I understand that if I fail to participate in the said activities and or respond to alarms I may be requested to turn my equipment back in to the department so it may be provided to other members.

_____ I understand that being a member of the Ellsworth Volunteer Fire Department is a privilege, not a right, therefore I will obey all orders of the officers and understand that I may be reprimanded for failing to do so.

_____ I understand that if my application is rejected by the members of the Ellsworth Volunteer Fire Department for any reason at all, I must wait a minimum of 12 months before submitting another application.

Signature _____ Date _____

Signature of Guardian _____ Date _____
(if applying for Junior Firefighter)

Application received by _____ Date _____

Fire Department use only

Investigating Officer 1 _____

Investigating Officer 2 _____

Investigating Officer 3 _____

Comments on investigation _____

Does the Investigation Committee recommend acceptance of this applicant? Y _____ N _____

Date of First Reading _____

Date of Second Reading _____

Voting Results Yes _____

No _____

Abstain _____

Date Oath taken _____

Probation Expires on _____

