



Woodburn Volunteer Fire Department Firefighter Application

Personal Information

Name			Social Security Number	
Last	First	Middle		
Address				
Street		City	State	ZIP
Telephone Numbers			Email address	
Home		Cell		
Date of Birth			Circle One: Male/Female	
Citizenship Status: <input type="checkbox"/> U.S. <input type="checkbox"/> Naturalized <input type="checkbox"/> Alien (Temporary) <input type="checkbox"/> Alien (Permanent)				

Education

High School				
Name	City	State	Year of Graduation (or GED Completion)	
Postsecondary				
Name	City	State	Years Attended	Degree
Military Service <input type="checkbox"/> Yes <input type="checkbox"/> No				
Branch	Rank	Years of Service	National Guard/Reserves	

Special Certifications: Specialized training, certifications or degrees

Type	Granting Agency	Date
Type	Granting agency	Date

Employment

Current Employer		
Name	Address	Hire Date
Position	Supervisor's Name	Telephone Number
Former Employers		
Name	Address	Employment Dates
Name	Address	Employment Dates
Name	Address	Employment Dates

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References

List three references who are unrelated to you whom you have know for at least one year

Name	Address	Telephone	Relationship
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Name	Address	Telephone	Relationship
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Name	Address	Telephone	Relationship
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Physical Record

Do you have any physical limitations that preclude you from participating in firefighting? Yes No

If yes, please describe the limitation and what can be done to accommodate your limitation

Emergency Contact Information

List two contacts who can be notified in case of an emergency

Name	Address	Telephone
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Name	Address	Telephone
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Previous Emergency Service Experience

List any emergency services experience (fire, police, EMS) that you have

Agency	Address (city, state)	Position	Dates of Service
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Agency	Address (city, state)	Position	Dates of Service
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I certify that the facts contained in this application are true and complete to the best of my knowledge. I also understand that if I am accepted for service, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements on this application and the contact of the references listed. I release all parties from all liability for any damage that might occur from the release of pertinent information, personal or otherwise. I also agree to have my criminal and driving history checked by the department.

Signature _____

Date _____

For Departmental Use Only

Emergency Services Request form filed/date _____ Applicant provided with By-Laws/date _____

Based on the information provided by the applicant, background check, and interview, the applicant is hereby (circle one) accepted/rejected for service with the Woodburn Vol. Fire Department. Date of vote: _____