

Franklin Township Fire District No. 4 Forest Grove Fire Company



Application for Membership

Name of Applicant: _____

Franklin Township Fire District No 4 Forest Grove Fire Company

PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE

D	ate	

APPLICATION FOR FIREFIGHTER APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

Applications are considered without regard to race, color, religion, gender, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or handicap

Junior members please complete the application section ONLY. Do not complete the background check authorization Regular members please complete the entire packet INCLUDING the background check authorization				
Name				
Last	First		Middle	Maiden
AKA				
(OTHER NAME	S USED SUCH AS NICKNAME	ES, MAIDEN NAM	IE, ADOPTIONAL, REI	LIGIOUS, ETC.)
Present address				
Number	Street	City	State	Zip
Telephone (Home)	Cell			
E-mail Address		@		
Date of birth	Age	Place o	of birth (State Only)	
Social Security Number (Full Applica	ants ONLY)			
Do you have previous firefighting ex	perience? ☐ Yes ☐ No			
If yes, where?			Year	s of service
Reason for leaving				

Education

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Business or Trade School				

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

Driving Record

DO YOU HAVE A DRIVER'S LICENSE? ☐ Yes ☐ No	
If "No", what is your means of transportation to the station?	
Driver's license number	State of issue
☐ Operator ☐ Commercial (CDL)	
Expiration date	
Have you had any accidents during the past three years?	•
Have you had any moving violations during the past three years	?? How Many?
Re	eferences
Please list two references other than relatives or previous emplo	oyers.
Name	Name
Address	Address
Telephone	Telephone
Relationship	Relationship
If you have previous firefighting experience, list previous fire chi-	ef as one of the references.
	I to adequately summarize a complete background. Use the space scribe your full qualifications for the position for which you are applying. If our certificates with application.
Signature	Date





Franklin Township Fire District No. 4 **Forest Grove Fire Company**

To:

Applicant

From:

Board of Fire Commissioners, District 4

Forest Grove Fire Company

Subject: Pre-Application Screening Application Instructions

Please note that a complete background check will be done prior to access to the Fire Company. It is imperative that you list ALL incidents for which you were detained, held, taken into custody, arrested, indicted or charged with any offense on the Application for Clearance and Issuance of Identification Card form. Also include expungements, not guilty or dismissed charges. Omission of any of the above will result in what is considered falsification of this document and this office can consider rejection of this application.

Please note that being detained, held, taken into custody, arrested, indicted or charged with an offence does NOT preclude you from being accepted as a member, therefore when in doubt, please list the incident.

Thank you for your cooperation.

Board of Fire Commissioners, District 4 Forest Grove Fire Company

Franklin Twp Fire District No 4 Is An Equal Opportunity Employer

Board of Fire Commissioners, District 4 Forest Grove Fire Company, Station 43-5 1635 Forest Grove Road Vineland, NJ 08360

BACKGROUND CHECK AUTHORIZATION

(PLEASE PRINT LEGIBLY)

(Circle one)	YES NO	If "YES", exp	lain below.	
Do you presently have an	y pending criminal cha	arges? YES	NO If "YES", explain b	elow.
			TION, SIGN AND DATE THE "AUTH LICATION MAY RESULT IN THE DI	
NATURE OF CONVICTION	DATE OF CONVICTION	AGE AT TIME OF INCIDENT	NAME & ADDRESS OF POLICE AGENCY OR COURT	DISPOSITION
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COMMENTS / EXPLANATIONS:	
AUTHORIZATION TO RELEASE INFORMATION:	
I hereby authorize the release of any and all information reg Commissioners, District 4, and if required to the Forest Gro order that they may determine my suitability for application application packet may be used in order to perform a backgr	ve Fire Company, Station 43-5 at their request, in and membership. All information contained in this
SIGNATURE OF APPLICANT:	DATE:

****** DO NOT WRITE BELOW THIS LINE *******

****** INVESTIGATION / INVESTIGATOR USE ONLY ********

Title applicant applying for: Firefighter / Membership to Fire Company

Sponsor: Board of Fire Commissioners, District 4

Division, Bureau or Unit: Forest Grove Fire Co	ompany, Station 43-5	
A minimum of 3 members of t	the Board of Fire Commissioners, District 4 must sign and app	prove this form
Sponsor's signature:	Date:	
The above names applicant's crimina	al history record indicates the following:	
NO Criminal Record		
Arrest and NO conviction(s	see attached)	
Arrest and conviction (see	e attached)	
Investigators Notes:		
Name of investigator (print)		
SIGNATURE	TITLE	DATE

	OFFICAL USE ONLY	
Chief's Office approval ☐ Yes ☐ No		Commission approval ☐ Yes ☐ No
Background check approved ☐ Yes ☐ No		Interview approval ☐ Yes ☐ No
Company approval ☐ Yes ☐ No		

NOTES