

FREDERICKSBURG FIRE
DEPARTMENT
124 W. Main
Street
Fredericksburg,
Texas 78624
830/997-5603

Application and Information Form

Name: _____ Social Security Number: _____

Address: _____, Fredericksburg, Texas 78624

Home Phone: _____ Age: _____ Height: _____ Weight: _____

Date of Birth: _____ Texas Drivers License _____

YOU MUST HOLD A VALID TEXAS DRIVERS LICENSE BEFORE YOU ARE INTERVIEWED.

Availability Time: _____

Employer: _____ Occupation: _____

Address: _____ Business Phone: _____

Person to Notify in Case of Emergency: _____

Relationship: _____ Address: _____ Phone: _____

List any experience you have in Fire Fighting, First Aid or Rescue. Attach Certificates if Applicable:

Department or Organization	Field of Experience	Years of Experience
----------------------------	---------------------	---------------------

PLEASE ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR ABILITY

1. Are you now or have you been under a doctor's care in the last six months?

Yes _____ No _____ Attach explanation if answer is "Yes"

2. Are you physically able to perform the duties of a Firefighter? Yes _____ No _____

3. Have you ever been convicted of a felony? Yes _____ No _____

4. By signing this application, you hereby give the Fredericksburg Volunteer Fire Department permission to do a background check with any and all law enforcement agencies. You also give the Department permission to do a background check with any and all of the departments and organizations you list under experience in firefighting, first aid and/or rescue.

- 5. By signing this application, you hereby commit to take a physical as prescribed by the City of Fredericksburg in its employment procedures and commit to complete the probation training as prescribed by the Department prior to responding to any fire department incident.
- 6. Any false statements or answers found on this application may result in immediate termination from this Department.

Applicants: Signature: _____ Date: _____

7. **EMPLOYERS CONSENT:** As employer(s) of the above named applicant, I (we) consent and agree to grant him time off from his duties to attend to his duties as a firefighter in the Fredericksburg Volunteer Fire Department.

DATE: _____ FIRM: _____

Per: _____

Title: _____

8. **ACTIVE MEMBER RECOMMENDATION:**

RECOMMENDED BY: _____ & _____

9. **INTERVIEWED BY OFFICERS:**

_____ DATE _____

10. MEMBERSHIP: APPROVAL DISAPPROVAL

Approved/Disapproved b Membership: _____ Date: _____

Date Accepted: _____ Date Accepted as full-fledged FF: _____

11. **ANNUAL APPLICATION RENEWAL**

Date Renewed: _____

With: _____
Officer or Shift Officer Signature

Date Renewed: _____

With: _____
Officer or Shift Officer Signature

Date Renewed: _____

With: _____
Officer or Shift Officer Signature

Date Renewed: _____

With: _____
Officer or Shift Officer Signature

**ILLEGAL SUBSTANCE ABUSE POLICY
FREDERICKSBURG VOLUNTEER FIRE DEPARTMENT**

The use of illegal substances and the misuse of prescription drugs has become a major concern and is a leading cause of accidents at both the workplace and on the highway. Illegal substance abuse not only leaves the individual at risk, but also places fellow firefighters and the general public at risk. The object of our substance abuse policy is to add another tool in our effort to provide a safe and healthy environment for our firefighters and citizens, prevent accidents and to comply with section 7.10 of the Texas Workers Compensation Act. It is the policy of the City of Fredericksburg to provide an environment free of substance abuse.

The policy of the City of Fredericksburg is to require substance abuse testing of all applicants to the Fredericksburg Fire Department. Additionally, anyone testing positive will not be eligible to become a member of the Fredericksburg Fire Department.

The use, possession, sale, transfer, purchase or being under the influence of any substances by a member of the Fredericksburg Fire Department at any time, on the City Premises or while engaged in Fire Department business is expressly prohibited and any violators will be subject to immediate dismissal.

Additionally, all Fredericksburg Fire Department members may be required to submit to annual re-testing, for cause testing, after accident testing, and random or periodic testing for substance abuse.

The City of Fredericksburg does not sponsor any specific drug testing program. These programs are available through public and/or private health care facilities in the Central Texas area. Affected members are encouraged to seek assistance for themselves and their families.

We do not offer nor require participation in drug and/or alcohol abuse education or training programs. These programs have proven to be very successful and affected members are encouraged to seek assistance.

**I HAVE READ AND UNDERSTAND THIS POLICY AND AGREE TO ABIDE BY
ITS TERMS AND CONDITIONS.**

DATE SIGNED

SIGNATURE OF APPLICANT