

COLUMBIA RIVER FIRE & RESCUE APPLICATION FOR VOLUNTEER SERVICE

- Volunteer Firefighter Volunteer EMT
 Support Services Volunteer Administrative Volunteer
 Resident Volunteer

OFFICE USE ONLY	
Date Received:	____/____/____
Time Received:	____: ____
I. D. Proof	_____
APP #:	_____

This is not an employment application. This is an application for volunteer service with Columbia River Fire & Rescue. At its own expense the Fires District will arrange for a surety bond for each of its volunteers. Unless the applicant's background is acceptable to a surety company (not relative to race, color, religious creed, national origin, sex or ancestry), it will be difficult to secure this bond, and we may be unable to utilize your services. Applicants must include a copy of your resume, if applicable, educational certificates, and a copy of your driver's license.

GENERAL INFORMATION

LAST NAME	FIRST	MI
STREET ADDRESS	CITY	STATE ZIP
MAILING ADDRESS (If Different from street address)	CITY	STATE ZIP
HOME TELEPHONE	BUSINESS TELEPHONE	SOCIAL SECURITY NUMBER
EMAIL ADDRESS		
DRIVER'S LICENSE NUMBER	STATE	EMT NUMBER STATE EMT LEVEL
MILITARY SERVICE LEVEL	BRANCH	RANK STATUS DATE OF DISCHARGE

EMPLOYMENT

MOST RECENT EMPLOYER	ADDRESS	POSITION
SALARY	EMPLOYED FROM	UNTIL REASON FOR LEAVING (IF APPLICABLE)
SUPERVISORS NAME	TELEPHONE	
PRIOR EMPLOYER	ADDRESS	POSITION
SALARY	EMPLOYED FROM	UNTIL REASON FOR LEAVING (IF APPLICABLE)
SUPERVISORS NAME	TELEPHONE	
NEXT PRIOR EMPLOYER	ADDRESS	POSITION
SALARY	EMPLOYED FROM	UNTIL REASON FOR LEAVING (IF APPLICABLE)
SUPERVISORS NAME	TELEPHONE	

EDUCATION

List education: High School; Trade schools, and colleges.

NAME/ LOCATION OF SCHOOL	Years Attended	Major	Graduate

PERSONAL REFERENCES

(NOT RELATIVES)

NAME	ADDRESS	PHONE	YEARS KNOWN
1.			
2.			
3.			
4.			

Do you speak any foreign languages? _____

Please describe any physical condition that might limit your performance:

Have you ever been convicted of a criminal offence? Yes No

Date: ____/____/____ Place _____

Nature of Offence: _____

(An affirmative answer will not automatically disqualify you from consideration)

Volunteer Service Work with Columbia River Fire & Rescue requires many hours of initial training plus regular or weekly training to maintain skills. You may also be expected to respond at any hour, seven days a week. Do you have any commitments or other responsibilities that would prevent you from meeting these requirements?

Yes No

If yes, please describe? _____

Please list any special skills or qualifications that may be useful to you or the fire district as a volunteer:

PLEASE READ BEFORE SIGNING

STATEMENT OF TRUTHFULNESS

I hereby certify that the information given by me on this application is to the best of my ability true and accurate. I understand that this application contains a minimal amount of information needed to verify my qualifications for the position for which I am applying. If accepted I may be requested to supply additional information necessary to begin my service file. I further understand that any misrepresentation or omission of information called for in this application is cause for cancellation of this application and/or dismissal from volunteer service.

Signature: _____ Date: ____/____/____

I _____, have made application for volunteer service with Columbia River Fire & Rescue, and hereby authorize it and or its agents to verify the information given by me on this application. I understand that the fire district or its agents may contact my former employers, my current employer, law enforcement agencies state and federal agencies and departments, educational institutions, and private business corporations that I have referred to on my application. I further understand that this verification process will be used in a confidential manner by the fire district or its agents.

Signature: _____ Date: ____/____/____