

# Eagle Volunteer Fire Association

## Volunteer Fire Fighter / EMT Application

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### PERSONAL INFORMATION

<b>NAME</b>	<input type="text"/>	<input type="text"/>
	Last	First
	Social Security Number	
<b>ADDRESS</b>	<input type="text"/>	
	STREET	APT#
	<input type="text"/>	
	CITY	STATE
	ZIP CODE	
<b>PHONES</b>	<input type="text"/>	
	HOME PHONE	CELL PHONE
	BUSINESS PHONE	
<b>E-MAIL</b>	<input type="text"/>	<b>Date of Birth</b> ____/____/____
Prior experience in Fire or EMS YES / NO		Drivers License #
* If Yes, where?		

### EXPERIENCE

DATES	TYPE(EXAMPLE-CLASSES/CERTIFICATIONS/TRAINING)	LOCATION	CONTACT INFO

USE SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED

### EDUCATION LEVEL

HIGH SCHOOL	DATE GRADUATED	OTHER INFO
ANY COLLEGE EDUCATION? Y / N	LIST ANY INFO.	

### REFERENCES (PERSONS YOU HAVE KNOWN 1 YR OR MORE)

NAME	ADDRESS	PHONE	RELATIONSHIP

### EMPLOYMENT REFERENCES (CURRENT AND LAST)

PLACE	ADDRESS	PHONE	CONTACT

### MISCELLANEOUS

Have you ever been convicted for any violations of the law, including felonies and misdemeanors? YES / NO  
 Any traffic violations during the past 5 years? YES / NO  
 If YES, please provide description of offense, place, and date on a separate sheet of paper or back side.

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_