



Gray Volunteer Fire Department



Application for Membership

Revised 7-9-2013

Applicant Information

Full Name: _____ Date: ____ / ____ / ____
(Last) (First) (M.I.)

Address: _____ Apt/Unit: _____

City: _____ State: _____ ZIP: _____ Phone: (____) _____ - _____

Email Address: _____ @ _____

Date of Birth: ____ / ____ / ____ Driver's License #: _____ State: _____

DL Issued: ____ / ____ / ____ DL Expires: ____ / ____ / ____

Qualifying Questions:

1. Are you a US Citizen? Yes No If "No", are you authorized to work in the US? Yes No
2. Have you ever volunteered for the GVFD before? Yes No If "Yes", when? _____
3. Have you ever been convicted of a felony? Yes No
If "Yes", please explain. List dates of conviction, and court: _____

Education

High School Attended: _____ City: _____ State: _____

Dates Attended: _____ to _____ Did you graduate? Yes No

College Attended: _____ City: _____ State: _____

Dates Attended: _____ to _____ Did you graduate? Yes No Type of Program: _____

References

Please list two references, other than family members that are familiar with your character and work ethic.

Name: _____ Address: _____

Phone: (____) _____ - _____ Relationship to applicant: _____

Name: _____ Address: _____

Phone: (____) _____ - _____ Relationship to applicant: _____

Please list any training or experience that you feel is similar or could help you in your role as a Firefighter:

Please provide a short statement as to why you are joining the Gray Volunteer Fire Department:

Disclosure and Agreement

I, _____, certify that the information contained in this application is, to my knowledge, correct and complete. I further acknowledge that I am requesting membership as a Volunteer Member, meaning no monetary incentives are implied, offered, or expressed. My signature below indicates that I authorize the Gray Volunteer Fire Department to investigate the statements made within this application, speak with references, employers, and acquaintances. I also authorize the Gray Volunteer Fire Department to conduct a background investigation to determine suitability for membership.

_____ Date: ____ / ____ / ____

-For Department Use Only-

Application Received: ____ / ____ / ____ Presented at Meeting: ____ / ____ / ____

Accepted: Yes No Reason for Decline: _____

Probation Start: ____ / ____ / ____ Probation End: ____ / ____ / ____

Approved By: _____ ID Number: _____