



## North Greenbush Fire District #1

P.O. Box 3 Wynantskill, New York 12198

### APPLICATION FOR VOLUNTEER FIREFIGHTER

Qualified applicants are considered without regard to race, color, creed, sex, national origin, age, marital or veteran status.

ANSWER ALL QUESTIONS TRUTHFULLY AND FULLY. A candidate may be rejected if he/she has intentionally made a false statement of a material fact, or has practiced, or attempted to practice any deception or fraud in his/her application, in his/her examination, or in securing his/her eligibility for appointment.

Omitting information, or giving false information, may result in a rejection of your application and removal of your name from consideration for possible appointment.

[Please Print]

Date of Application \_\_\_\_\_ SS# \_\_\_\_\_

Name \_\_\_\_\_  
[Last] [First] [Middle]

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Previous Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # \_\_\_\_\_ DOB \_\_\_\_\_

Have you previously filed an application with this organization? [ ] Yes [ ] No

Have you any previous firefighting experience? [ ] Yes [ ] No

If yes, list department name and time period of duty:

\_\_\_\_\_

Are you a citizen of the United States? [ ] Yes [ ] No

If not, do you possess an Alien Registration Card? [ ] Yes [ ] No

Do you have any friends or relatives who are presently members?  
of this organization? If yes, please list name[s] [ ] Yes [ ] No

\_\_\_\_\_

Have you ever been charged with a crime? [ ] Yes [ ] No

Have you ever been convicted of a misdemeanor or felony? [ ] Yes [ ] No

Have you ever been convicted of an arson-related crime? [ ] Yes [ ] No

Have you ever been convicted of any traffic/motor vehicle offense? [ ] Yes [ ] No

If yes to any, please provide details:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any physical, mental or medical impairment or disability that would limit your job performance? If necessary, please explain.  Yes  No  Maybe

\_\_\_\_\_  
\_\_\_\_\_

Are you presently a member of any other civic organization?  Yes  No

If yes, please list \_\_\_\_\_  
\_\_\_\_\_

Please give name, address and telephone number for three [3] references, not related to you.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Education:** Years Completed \_\_\_\_\_ Diploma/Degree \_\_\_\_\_  
Specialized Training, Skills \_\_\_\_\_

**Employment:**  
List all places of employment for the past three years [most current first]

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

**Driver Information:**  
State License Issued \_\_\_\_\_ Vehicle Registration Issued \_\_\_\_\_

Driver License Number \_\_\_\_\_

Insurance Carrier \_\_\_\_\_

**Consent for Disclosure**

I, \_\_\_\_\_ give the Investigating Officer of the North Greenbush Fire District No. 1 my consent to make inquiries of my employers, neighbors, police agencies and insurance carrier while conducting an investigation of my character, past record and responsibility.

I, \_\_\_\_\_ affirm under penalty of perjury, that all information provided is true, accurate and complete to the best of my abilities.

SIGNATURE OF APPLICANT \_\_\_\_\_ Date \_\_\_\_\_