

Town of Wheatland Volunteer Fire Department

Applicant Information

Name	
Street address	
City, State, Zip	
Home phone	
Mobil phone	
Social Security number	Drivers license number
E-mail address	

Have you ever served in any branch of the Military?
If yes, give branch and date of service and type of discharge
Are you a member of the reserve?

Availability

During which hours are you available for volunteer assignments?

- | | |
|---|---|
| <input type="checkbox"/> Weekday mornings | <input type="checkbox"/> Weekend mornings |
| <input type="checkbox"/> Weekday afternoons | <input type="checkbox"/> Weekend afternoons |
| <input type="checkbox"/> Weekday evenings | <input type="checkbox"/> Weekend evenings |

Interests

Tell us what areas you are interested in volunteering for the fire department

- Housekeeping
- Light equipment maintenance
- Fundraising/special events
- Firefighting
- EMS
- Auxiliary

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

--

Previous Volunteer Experience

Summarize your previous volunteer experience.

--

Person to notify in case of emergency

Name/relationship	
Street address	
City, State, Zip	
Home phone	
Mobil phone	

List three references

Name	
Street Address	
City, State, Zip	
Phone	
How long known?	

Name	
Street Address	
City, State, Zip	
Phone	
How long known?	

Name	
Street Address	
City, State, Zip	
Phone	
How long known?	

Volunteer

Summarize how you feel you will benefit this fire department

--

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age or disability.

Thank you for completing this application form and your interest in volunteering with us

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name(printed)	
Signature	
Date	