LEWIS COUNTY FIRE DISTRICT #5

APPLICATION FOR VOLUNTEER MEMBERSHIP

*Please Type or Print Clearly

Name_____
Last Name **First Name** **Middle Initial**

Personal Information

Current Address: _____**City:**_____ **State:** _____

Mailing Address ***(if different then above)*:**_____

City: _____ **State:**_____ **Phone Number:**_____

Secondary Phone Number: _____ **Email address:** _____

Date of Birth: _____

Eligible to Work in the United States? Yes _____ **No** _____

Have you been convicted of a felony? Yes _____ **No** _____

If you answered "Yes," what where you convicted of? _____ **Explain:**

_____

Marital Status: Married____ **Single**____ **Divorced**____ **Separated**____

Spouses Name: _____

Name & Ages of Children: _____

_____

Emergency Contact of Accident or Death:_____

Address: _____**Phone Number:** _____

Relationship:_____

Military History

Have you served in the military? Yes _____ No _____

(Complete the following only if you answered "Yes" previously)

Are you currently active in the military? Yes _____ No _____

Military Service Branch: _____Date: _____

Type of Discharge_____

Educational Information

Formal Education 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

High School Attended_____ Year Graduated_____

College/Technical College_____ Year Graduated_____

Emphasis_____

Degree Completed_____

College/Technical College_____ Year Graduated_____

Emphasis_____

Degree Completed_____

Previous Fire or Medical Experience

Do you have previous firefighting experience? Yes _____ No _____

Do you have previous medical experience? Yes _____ No _____

(Complete the following only if you answered "Yes" to either previous question)

Department/Agency: _____Position Held: _____

Address: _____ Dates: _____

Department/Agency: _____Position Held: _____

Address: _____ Dates: _____

Certifications/Training: _____

_____

Employment History

Your Current Occupation: _____

Job Description: _____

Employer: _____ Phone Number: _____

Address: _____

List all other previous work history previously to your current occupation. List them in chronological order of newest to oldest.

Employers Name: _____ Address: _____

Phone Number: _____ Immediate Supervisor: _____

Date Hired: _____ Departure Date: _____

Reason for Leaving: _____

Employers Name: _____ Address: _____

Phone Number: _____ Immediate Supervisor: _____

Date Hired: _____ Departure Date: _____

Reason for Leaving: _____

Employment History (Continued)

Employers Name: _____ Address: _____

Phone Number: _____ Immediate Supervisor: _____

Date Hired: _____ Departure Date: _____

Reason for Leaving: _____

Employers Name: _____ Address: _____

Phone Number: _____ Immediate Supervisor: _____

Date Hired: _____ Departure Date: _____

Reason for Leaving: _____

Can we contact your previous and current employers? Yes _____ No _____

If you answered "No," which employers can we contact? _____

_____

Personal References

List 3 personal references that are not related to you:

Name	Address	Phone Number
Name	Address	Phone Number
Name	Address	Phone Number

I am giving full permission to Lewis County Fire District #5 to contact my personal references about my possible volunteer membership.

DATE: ____/____/____ **_____**

Signature

I hereby certify that all statements are true and complete as far as I can determine. I understand that any misstatements may subject me to disqualification or dismissal.

DATE: ____/____/____ **_____**

Signature

LEWIS COUNTY FIRE DISTRICT #5

WAIVER FOR REFERENCES & BACKGROUND CHECK

I, _____ hereby grant permission for Lewis County Fire District #5, to contact any, and all of my prior employers to inquire about any and all aspects of my prior employment. I understand and agree that Lewis County Fire District #5 may ask for, and receive information regarding my performance, duties, compensation and any other matter in any way related to my prior employment. I hereby waive any right I may have, now, or in the future, to bring a claim against Lewis County Fire District #5, its past, or present agents, employees, officials, representatives or attorneys, in their individual or official capacities, for any information they may provide to Lewis County Fire District #5. I acknowledge that this permission and waiver are freely and voluntarily given to **Lewis County Fire District #5.**

I also sign this document as a release for Lewis County Fire District #5 to run a criminal background check as part of the Volunteer application process to join Lewis County Fire District #5.

DATE: _____/_____/_____ **_____**

Signature

LEWIS COUNTY FIRE DISTRICT #5

CRIMINAL JUSTICE RECORDS REQUEST

P.O BOX 259
NAPAVINE, WA 98565-0259
PHONE: (360)262-3320
FAX: (360)262-3893

CRIMINAL JUSTICE RECORDS REQUEST
RELEASE OF INFORMATION FORM

Date: _____

Name_____
Last Name First Name Middle Name

Aliases: _____

Address: _____City:_____ State: _____ Zip: _____

Race: _____ Sex: _____ DOB: _____

I understand that the Criminal History Information provided by Washington State Patrol and released to Lewis County Fire District #5's custody will not be released to any unauthorized persons pursuant to RCW 10.97 Washington State Criminal Records Privacy Act.

DATE: ____/____/____ _____

Signature

LEWIS COUNTY FIRE DISTRICT #5

VOLUNTEER LETTER OF COMMITMENT

_____

Print Name

As a member of Lewis County Fire District #5, I am making a commitment to my family, myself, the community, and other members of Lewis County Fire District #5 to maintain my training, responses, and support of the department.

The Standard Operating Guidelines require that I maintain a minimum level of attendance at training and a level of minimum responses to calls within the fire district. Also, I agree to support operations of the department as the needs of the community and surrounding area requests.

This commitment and goal of all personnel is to represent Lewis County Fire District #5 in a positive, safe, and professional manner. Our mission is to provide Fire and EMS services to protect lives, salvage property, and stop further loss to the environment.

In signing this letter you accept the commitments of this agency to the community and your fellow members, and that you will continue to support the mission, values, and the policies of Lewis County Fire District #5.

DATE: ____/____/____ _____

Signature

LEWIS COUNTY FIRE DISTRICT #5

Essay

Please attach a 1-page (written or typed) essay about yourself. Include who you are, hobbies, family, work, education, etc. Include anything you feel we should know about you. This gives us a chance to learn a little bit about you before the interview.

Physical Test

There will be a physical test after the interview. The physical test will include:

- Push-ups
- Sit-ups
- Running
- Pulley hoist
- Equipment Carry
- Tire Drag

Please prepare accordingly for this Physical Test.

Ride Along

As part of the application process, an 8-hour ride along will be mandatory. Please fill out the following forms.

By signing I acknowledge that I have read and understood the above.

DATE: ____/____/____ **_____**

Signature

Ride Along Request Form

Date: _____

Name: _____ Age: _____ DOB: _____
(Note: Current driver's license must be presented for verification of birth date)

Address: _____

City: _____ State: _____Zip: _____

Contact Number: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Reason for Ride Along: **Volunteer Applicant** _____
_____

Requested Dates: **Volunteer Coordinator will reach out by phone to schedule dates.**

For Office Use:

Rider Name: _____
Date Scheduled: _____

Scheduled to Ride: Sta. 1

Confirmed with BC/MSO: _____
Duty Crew: _____

Scheduled by: _____
Date: _____

RIDE ALONG WAIVER

In consideration of Lewis County Fire District 5 granting me the opportunity to accompany and observe Lewis County Fire District 5 personnel, both in the firehouse and while riding in Lewis County Fire District 5 owned vehicles, and in order to take advantage of that opportunity, I acknowledge that the duties of the Fire Department are inherently dangerous, and that no duty is owned to me by Lewis County Fire District 5 or its agents while engaged in their official duties, and I understand that I assume all risks of such activity and agree to release and hold Lewis County Fire District 5, and its officials, officers, employees and agents harmless from any and all liability whatsoever for any and all injuries, damages, and claims l, my heirs, dependents and assigns may sustain as a result of me accompanying Lewis County Fire District 5 personnel. I also understand that I am not an employee or agent of the Lewis County Fire District 5, but only an observer, and I am completely responsible for my acts, and shall hold the Lewis County Fire District 5, its officials, officers, employees, and agents harmless from any and all liability whatsoever for any and all injuries, damages and claims resulting from my actions.

I, _____ have read this waiver and fully understand its contents and intend to be legally bound thereby.

DOB _____ Address _____

Signature _____ Date _____

The remainder of this form is to be completed by a parent or guardian of any observer under eighteen years of age.

_____, the parent or legal guardian of the above named minor have read this waiver of liability, understand it, and hereby consent to the minor accompanying Lewis County Fire District 5 personnel both in the firehouse and while riding in Lewis County Fire District 5 owned vehicles, and acknowledging the risks involved, and assuming those risks, I agree to release and hold Lewis County Fire District 5, its officials, officers, employees and agents harmless from any and all liability whatsoever for any and all injuries, damages and claims that may arise as a result of the minor accompanying said personnel of the Lewis County Fire District 5.

Parent Signature _____ Date _____