

BEDFORD VILLAGE FIRE DEPARTMENT



APPLICATION FOR MEMBERSHIP

1. <u>Applicant Information</u>

Name:
Address:
How many years have you resided at this address?
If less than 3 years, list previous address (is):
Home Phone: Mobile Phone:
Email Address:
Date of Application:
Can You Commit to a Minimum of 3 Years' Service with the Bedford Village Fire Dept.?
2. <u>Membership Category to be applied for</u>
Active Membership: Youth Program: Active Membership:
3. <u>Emergency Contact Information</u>
Name:
Address:
Home Phone: Mobile Phone:
Relationship to You:
4. <u>Personal Information</u>
Are You a Citizen of the United States? If not, what is Your Residency Status? (If not a citizen, provide a copy of relevant documentation)
Do you current possess a driver's license? State: Type: License Number: Date of Expiration:
Do you have a social networking account (E.g., Facebook, Instagram, Twitter)? If so, please list:

5. <u>Employment History</u>

Please list your employment history for the last five years. Indicate if you are currently not employed. (Use a separate sheet of paper, if necessary / indicate if you are a full-time student)

Name: ______Address: ______

You're Position:		
Supervisor:	Phone:	
		============================
Name:		
Address:		
You're Position:		
Supervisor:		
Dates of Employment:		

6. <u>Education</u>

High School:	_ Did You Graduate:
College:	Did You Graduate:
Graduate:	Did You Graduate:
If you are not presently enrolled in college, do you have plans to enrol	oll in a college or university?
Please explain:	

7. <u>Military Service</u>

Have You Served in the U.S. Arm	ed Force?	_ If so, What Branch:	
Years of Service:	Discharge Status:	Reserve Status:	
Did You Receive Special Training that Might be Applied to the Fire Department:			

8. <u>Fire Department Status</u>

Are you now or have you ever been a member of a paid or volunteer fire department or volunteer ambulance service: ______

If Yes, Which Department:	 Years of Service:	
Reason for Leaving:		

9. <u>Personal References</u>

Please list three personal references (other than members of the Bedford Village Fire Department) to whom we may inquire as to your character

Name:		
Addroses		
Relationship to You:		
Phone:	Email:	
Name:		
Address:		

Email:	
Email:	
	Email:

Also list the names of any acquaintances who are members of the Bedford Village Fire Department:

10. <u>Background Information</u>

Have you ever been convicted of or pled guilty to a felony, misdemeanor, insurance fraud, arson, sexual misconduct, perjury, excluding offenses where the record has been sealed, purged, or where you have been exonerated?

Are there any criminal charges pending against you? _____

Following acceptance of an application for membership to the Bedford Village Fire Department, an applicant is required to undergo a physical examination by a physician designated by the Department, to determine the applicant's ability to perform the duties of a firefighter or an EMT. If you are accepted for membership will you agree to undergo this examination?

AFFIRMATION OF THE APPLICANT

I affirm that I have read the foregoing questions and have fully, truthfully and accurately answered the same. The foregoing answers and information are true to the best of my knowledge, except if made on the basis of information and belief, and as to such answers, I believe them to be true and accurate.

I understand that intentionally misrepresenting or omitting any material fact called for in this application or in subsequent inquiries in connection with this application constitute grounds for immediate discharge from the Department or, if discovered prior to acceptance of my application, to immediate rejection. I give permission to the Bedford Village Fire Department to make any investigation relative to consideration of my qualifications for membership in the Bedford Village Fire Department any will fully cooperate in such investigation.

I do hereby make application for membership to the Bedford Village fire Department and if elected, will obey all lawful orders of my superiors, will be amiable to discipline, and will confirm to and abide by the laws of the State of New York and the By-Laws and the general orders of the Bedford Village Fire Department.

Signature of Applicant

Date

If Under 18 Years of Age:

I (Parent/Guardian)	, understand that my son/daughter is applying for
membership as [check one] an () Active () Associate ()	Youth member of the Bedford Village Fire Depart-
ment. I also understand that he/she will be eligible to receive	training and respond to emergencies, both of which
may have inherent risks.	

I have read Department Order 15-02B, Guidelines for Participation – Action Junior Members, with my son/daughter and we understand and will follow them. I will notify the Chief of the Bedford Village Fire Department in the event that my son/daughter fails to maintain a "C" average grade in school. I give the Bedford Village Fire Department permission to use photos or other likenesses of my son/daughter on its web site or in other forms of communication, as it reasonably determines appropriate. I understand that any violations of the Department's By-Laws, Standard Operating Guidelines and/or Departmental Orders may result in the suspension or termination of membership of my son/daughter.

Signed:	Date:
Print Name:	Email:
Address.	

APPLICANT'S AUTHORIZATION FOR RELEASE OF INFORMATION

In order to confirm the information I supplied on my application for membership with the Bedford Village Fire Department, I authorize all licensing agencies, educational institutions, law enforcement agencies, present and former employers, and the military services to disclose their relevant records about me to the Bedford Village Fire Department whether the information be of public, private or confidential nature; and I release them, from any liability and responsibility for doing so.

This authorization, on ordinal copy form, shall be valid for this and any further information, reports or updates that may be requested.

I understand that this form will accompany requests for official documents and confirmations of my credentials.

Applicant Name
Date: _____

Applicant Signature

Witnessed by:

Name and Title

Signature