

# New London Volunteer Fire Dept.

## *Application For Membership*



FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_ MIDDLE INITIAL: \_\_\_\_\_ SSN#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

DATE OF APPLICATION: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ EMPLOYER: \_\_\_\_\_ WORK HOURS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TELEPHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ AGE: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

DRIVERS LICENSE CLASS: \_\_\_\_\_ DRIVERS LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_ EXPIRES: \_\_\_\_\_

MEMBERSHIP CLASSIFICATION: (CHECK ONLY ONE) :  REGULAR  JUNIOR \*\* (see below)

CIVIC ORGANIZATIONS CURRENTLY MEMBER OF: \_\_\_\_\_

PAST CIVIC ORGANIZATIONS: \_\_\_\_\_

IN CASE OF EMERGENCY PLEASE NOTIFY (must be filled in) : \_\_\_\_\_ PHONE # : \_\_\_\_\_ - \_\_\_\_\_

### PLEASE READ CAREFULLY BEFORE SIGNING:

1. I understand that by completing this application there is no guarantee that I will be accepted as a member of the New London Fire Department. I also certify that the information on this application is complete and true to the best of my knowledge. **(initials: \_\_\_\_\_)**.
2. Mandatory duty requirements of the New London Vol. Fire Dept are as follows: **Completion of NYS Firefighter 1 Class within ( ) year(s)**, 14 hours initial safety training, 8 hours annual refresher training, participation in at least (1) in-house training session per month, attend (6) company meetings annually, respond to at least 25% of emergency calls annually, and participate in company fund raising efforts. **(initials: \_\_\_\_\_)**.
3. **If my application is accepted I must within 90 days have a Dept physical exam and document that I am able to perform the duties of a Firefighter.** I also certify that at the time of this application that I DO NOT suffer from seizures, heart conditions, or emphysema. **(initials: \_\_\_\_\_)**.
4. If i am under the age of 18, **I MUST** have my parents sign the permission slip on this application below.

**Applicant's Signature** (must Sign) \_\_\_\_\_

Proposed by: 1. \_\_\_\_\_ 2. \_\_\_\_\_

1. Application Results (Fire Department):  Accepted  Rejected by a majority vote at the \_\_\_\_\_ meeting. PRESIDENT: \_\_\_\_\_ CHIEF: \_\_\_\_\_
2. Application Results (Commissioners):  Accepted  Rejected by a majority vote at the \_\_\_\_\_ meeting. CHAIRMAN FIRE DISTRICT #4: \_\_\_\_\_

### \*\* PARENTAL PERMISSION \*\*

We the parents / guardians of \_\_\_\_\_ are aware that our Son / Daughter is applying for membership in the New London Fire Department and we give our permission to do so. I also understand that our Son / Daughter will have **limited Firefighting / Emergency Response duties** until they reach the age of 18.

Parent/Guardian #1: \_\_\_\_\_ Date: \_\_\_\_\_ Parent/Guardian #2: \_\_\_\_\_ Date: \_\_\_\_\_

I, \_\_\_\_\_ as a Chief Officer of the New London Vol. Fire Department have verified that the parents of this applicant are fully aware that their child has applied for membership in our department.

**\*\*\* ALL APPLICANTS ARE SUBJECT TO A SHERIFFS DEPT BACKGROUND CHECK \*\*\***

**\*\*\* ANY AND ALL FELONIES WILL BE A DISMISSAL FROM JOINING THE FIRE DEPT \*\*\***