

North Tooele Fire District

ESTABLISHED 1987

APPLICATION FOR VOLUNTEER MEMBERSHIP

You must be eighteen (18) years of age AND a resident of North Tooele Fire District (in the communities of Stansbury Park, Lake Point, Erda or Pine Canyon) to apply for membership and complete the attached form furnishing all requested information as it applies to you. **If you fail to answer all questions fully and accurately, you may delay consideration of your application.** In addition to this application, a criminal history report from the Utah State Bureau of Criminal Investigation is required.

This application may be presented to any Officer of the North Tooele Fire District or mailed to: North Tooele Fire District Application Committee, 179 Country Club, Stansbury Park Utah, 84074.

After presenting your application, the information in your application will be verified and a meeting and interview will be arranged between you and the Chief. The Chief will consider whether to accept or reject your application. If your application is accepted, and there are openings in the District, the application will be approved and additional meetings will be scheduled for your introduction to the District. If there are no available positions, your approved application will go into a dated file for future membership as a position becomes available. North Tooele Fire District reserves the right to reject an application for any reason.

APPLICATION OF

NAME: _____

E-MAIL ADDRESS: _____

INTERVIEWED BY: _____ DATE _____

The Chief or other Officers, having interviewed this application, hereby approves or disapproves this applicant.

Approved

Disapproved - Explanation: _____

11	Do you have a fear of heights? Yes_____ No_____
	Do you have a fear of confined spaces? Yes _____ No _____

12	MEDICAL HISTORY Firefighting and EMS response are both physically and mentally demanding endeavors.
	Do you have any physical limitations that should be considered? Yes_____No_____
	Do you have any chronic disease? Yes_____ No _____
	Are you receiving any special medical treatment or medications? Yes _____ No_____
	If yes to any of the above questions, please explain _____

13	EMPLOYMENT HISTORY	
	Position (Current):	Name & Title of Immediate Supervisor
	Employer (company or organization)	Address and Phone # of Employer
	Dates of Employment: From_____To_____	Describe your duties, responsibilities,
	Number of hours worked per week _____	
	Reason for leaving _____	
	Position:	Name & Title of Immediate Supervisor
	Employer (company or organization)	Address and Phone # of Employer
	Dates of Employment: From_____To_____	Describe your duties, responsibilities,
	Number of hours worked per week _____	
	Reason for leaving _____	

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REFERENCES

List three persons, other than relatives, who know you and your qualifications.

1. Name_____	Address_____
Relationship_____	_____
	Phone (____) ____ - _____

2. Name_____	Address_____
Relationship_____	_____
	Phone (____) ____ - _____

3. Name_____	Address_____
Relationship_____	_____
	Phone (____) ____ - _____

15

Are you a citizen of the United States? Yes_____ No_____

Are you legally eligible for employment in the United States? Yes_____ No_____

16

Do you have a valid drivers license Yes_____ No _____

License Number_____ State_____ Exp. Date_____

17

Do you authorize the North Tooele Fire District to check your driving record? both now, and on a periodic random basis during membership for repeated or significant traffic violations? Yes_____ No _____

18

Do you agree to comply with requests for random drug screens?

Yes _____ No _____

19

Have you ever been convicted of a crime other than a minor traffic violation?

Yes_____ No_____

Have you ever been convicted of arson or been a suspect in an arson investigation?

Yes_____ No_____

If yes to either question, please explain

A conviction does not automatically mean that you cannot be selected for membership. The nature of the offense and when it occurred will be considered. Give all of the facts to aid decision-making. (Attach additional sheets if necessary.) A record check will be run before selection for all candidates.

20 Does your application meet with the approval of your current employer?
Yes _____ No _____ N/A _____

21 Please describe any additional experience (paid or volunteer), activities or accomplishments that are relevant to the Fire District. Include name of organization, dates, and amount of time involved. Attach additional sheets if necessary.

22 Which area of Emergency Service are you most interested in?
Fire Suppression _____ EMS _____ Both _____

23 It is the Applicants responsibility to provide to the North Tooele Fire District a BCI Criminal History Report dated **within the last 90 days** prior to the review of this application. Please note: A concealed weapons permit does not meet this requirement. This background check is obtained through the Utah Department of Public Safety, Bureau of Criminal Identification. You may contact them at:

Utah Department of Public Safety
Bureau of Criminal Identification (BCI)
3888 West 5400 South
Salt Lake City, Utah 84129
801-965-4445
www.publicsafety.utah.gov/bci

Their office hours are Monday–Friday, 8 am – 5 pm. The office is closed weekends and state holidays.

Please attach the original Criminal History Report that you receive from BCI to the back of this application. Any application turned in without a BCI Criminal History Report will NOT be submitted to the Chief for review.

Tooele County and North Tooele Fire District are Equal Opportunity Employers.

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I _____ desire to make an application for voluntary membership with the North Tooele Fire District, pledging myself to conform to all rules of said District, to obey all orders given me by those in authority, to answer all calls, and to attend all training and meetings to the best of my ability. I pledge to conduct myself at all times in such a manner as not to throw discredit on the District or its members. These statements made by me in this application are full and true to the best of my knowledge and belief. I understand that the information provided may be verified and any willful misstatement of material facts herein will cause forfeiture on my part of all rights to membership with the North Tooele Fire District. I further understand that North Tooele Fire District reserves the right to reject my application for any reason and that volunteer members can be terminated without cause.

Signature _____ Date Signed _____