

# PUPPY CREEK FIRE DEPT.

## APPLICATION FOR MEMBERSHIP

Name \_\_\_\_\_ Age \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
St. or Rd Name  
City State Zip Code

Home Phone ( ) - \_\_\_\_\_ Date of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_ Education \_\_\_\_\_  
Highest grade completed

Married? \_\_\_\_\_ Spouse's Name \_\_\_\_\_

Next of Kin \_\_\_\_\_  
If Different than above phone

Occupation \_\_\_\_\_

Employer \_\_\_\_\_  
Name

Phone City State Zip Code

Previous Address \_\_\_\_\_

Drivers License \_\_\_\_\_  
Number State Class Expiration date

Previous Fire Experience \_\_\_\_\_  
Name of Dept. and dates of service

Do You Have Any Certificates \_\_\_\_\_ Level 1&2 \_\_\_\_\_

Haz-mat \_\_\_\_\_ EMT \_\_\_\_\_ C.P.R. \_\_\_\_\_ First Responder \_\_\_\_\_

Is there any physical reason that would prevent you from performing Duties

As a Fire Fighter \_\_\_\_\_

**Are you under a physician's Care?** \_\_\_\_\_  
Explain

**Have your drivers license ever been revoked?** \_\_\_\_\_  
Explain

**Have you ever been arrested for driving under the influence?** \_\_\_\_\_  
Alcohol or other controlled sub.

**Have you ever been arrested of a felony?** \_\_\_\_\_  
Explain

**References** \_\_\_\_\_  
Names Addresses phone

The information is true to the best of my knowledge. Puppy Creek Fire Dept. has my permission to solicit, information regarding my background to include my driving record. If erroneous entries have been made, Puppy Creek Fire Dept. has the right to dismiss the applicant.

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_