

VOLUNTEER MEMBER APPLICATION SOUTH THURSTON FIRE AND EMS

Select the position(s) you are interested in volunteering for

Application Date:	□Firefighter □EMT □Resident Program				
CONTACT INFORMATION:					
NAME:	EMAIL: _				
LAST FIRST	MIDDLE				
MAILING ADDRESS:					
STREET	CITY	STATE	ZIP		
HOME PHONE: ()C	ELL: ()	Best way to contac	ct you: □ Home □Cell		
PERSONAL INFORMATION:					
DRIVER'S LICENSE NO:	STATE:	EXPIRATION DATE:			
			MONTH/ DAY/ YEAR		
AUTO INSURANCE COMPANY:		EXPIRATION DATE:			
			MONTH/ DAY/ YEAR		
Have you lived in any other state? □Yes □	No If yes, where :				
Do you have a clean driving record? □Yes :	□ No If no, please explain: _				
Have you ever been convicted of a felony?	? □Yes □ No Misdemeanor?	⊐Yes □ No When?			
If yes, please explain:					
NOTE - If you have ever been convicted of a felony ovolunteer with the Department do not proceed with		against another individual	in the past ten years, you a		
EDUCATION HISTORY:					
SCHOOL NAME/CITY, STATE	YEARS COMPLETED	DE	GREE/DIPLOMA		

EMERGENCY SERVICE RELATED SKILLS, EXPERIENCE, & CERTIFICATES:

CERTIFICATE	EXPIRATION DATE	SKILL/EXPERIENCE
OTHER: Add any additional information relative	to your qualifications, which have not b	peen mentioned in this application:
RELEASE & AUTHORIZATION:		
	an I cortify that my answers are true an	ad correct to the best of my knowledge

By signing and submitting this application, I certify that my answers are true and correct to the best of my knowledge. I understand that false or misleading information in my application or interview shall be cause for rejection of my application or release from membership.

When considering individuals for employment (both career and volunteer), conviction/criminal history records are reviewed as they are related to the content and nature of the work, and the safety and security of the fire district staff and the public. A conviction/criminal history does not necessarily disqualify an individual for employment/volunteer membership. Criminal history records will be subject to a satisfactory criminal conviction report.

By signing and submitting this application, I authorize Thurston County Fire Protection District No. 12 to conduct a complete background investigation for the purpose of verifying the information contained in my application and my fitness for the position that I have applied for. I further acknowledge and agree that the District may:

- Contact my present or former employers for all information relating to achievement, performance, attendance, personal history, and discipline.
- Confirm the status of my driver's license and driving record.
- Inquire into any criminal convictions on my record.
- Contact any personal references provided.
- Verify my educational background and training.

I authorize any person, firm or corporation contacted by the District to release any of the above records to the District. I agree to:

- Waive any privilege of confidentiality I may have with respect to said records.
- Waive any claims against the District or against any prior employers as a result of the District's collection of said information.

I hereby declare the information provided by me and the statements above are true, correct and complete to the best of my knowledge. I understand that if I am selected to be a member, any misleading statement or omission of fact shall be considered cause for dismissal. If membership is obtained from this application, I agree to comply with all the rules and regulations of the District.

APPLICANT:	/	
PRINT NAME	SIGNATURE	DATE

SOUTH THURSTON FIRE AND EMS IS AN EQUAL OPPORTUNITY EMPLOYER.

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