

Stonington Volunteer Fire Department

Membership Application

Contact Information

Name: _____ SSN: _____

Mailing Address: _____

Physical Address (if different from above): _____

How long have you lived at this address? _____

Cell Phone Number: _____ Cell Phone Provider: _____

Driver's License Number: _____ State: _____ Expiration Date: _____

Email Address: _____ T-Shirt Size: _____

Are you legally eligible to work in the United States? Yes No

Are you under the age of 18? Yes No If yes, state birth date: _____

Interest & Background

Please check off your points of interest with the Stonington Fire Department

- | | | |
|--|---|--|
| <input type="checkbox"/> Firefighting | <input type="checkbox"/> Dispatching | <input type="checkbox"/> Incident Helper |
| <input type="checkbox"/> Truck Driving | <input type="checkbox"/> Pump Operator | <input type="checkbox"/> Traffic Control |
| <input type="checkbox"/> Jaws of Life | <input type="checkbox"/> Grass/Woods Fire | <input type="checkbox"/> Car Accidents |

Of your point of interest(s) checked above, are you able to perform essential functions of those jobs? Yes No

Have you been a member of a fire department or similar organization? Yes No

If yes, what organization? _____

Address: _____

Contact Person: _____

Years of Service: _____

In your own words, why do you wish to join the Stonington Fire Department? What can this department gain from your membership? What do you expect to gain from this membership?

How did you hear about the Stonington Fire Department?

Work History

Beginning with your present, or most recent job, list employment held for the past five years, including part-time, temporary, or seasonal employment. Attach extra pages, if necessary. Please indicate if you feel your present job would be in jeopardy if inquiries are made.

1. From: _____ To: _____
Employer: _____
Job Title: _____
Address: _____
Phone Number: _____
Supervisor: _____
Reason for Leaving: _____

2. From: _____ To: _____
Employer: _____
Job Title: _____
Address: _____
Phone Number: _____
Supervisor: _____
Reason for Leaving: _____

3. From: _____ To: _____
Employer: _____
Job Title: _____
Address: _____
Phone Number: _____
Supervisor: _____
Reason for Leaving: _____

4. From: _____ To: _____
Employer: _____
Job Title: _____
Address: _____
Phone Number: _____
Supervisor: _____
Reason for Leaving: _____

5. From: _____ To: _____
Employer: _____
Job Title: _____
Address: _____
Phone Number: _____
Supervisor: _____
Reason for Leaving: _____

Education History

Did you graduate from high school? Yes No

If not, do you have your GED? Yes No

If not, what is the highest grade level completed? _____

Name of High School: _____

Location: _____

Do you have a postgraduate degree? Yes No

If yes, what degree? Associate Bachelor Masters PhD

1. Post Graduate School: _____

Address: _____

2. Post Graduate School: _____

Address: _____

References

List three people, who are not related to you by blood or marriage, who are familiar with your education and work experience.

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

May we contact your employers and references? Yes No

Background

Have you ever been disciplined, discharged, or asked to resign from a position? Yes No

Have you ever resigned from a prior position after a complaint had been received against you or your conduct was under investigation or review? Yes No

Has your contract in a prior position ever been non-renewed? Yes No

Have you ever been charged with or investigated for sexual abuse or harassment of another person? Yes No

Have you ever been convicted of a crime (other than a minor traffic offense)? Yes No

Have you ever entered a plea of guilty of “no contest” (novo contendere) to any crime (other than a minor traffic offense)? Yes No

Has any court ever deferred, filed, or dismissed proceedings without finding of guilt and required that you pay a fine, penalty or court costs and/or imposed a requirement as to your behavior or conduct for a period in connection with any crime? (other than a minor traffic offense)? Yes No

If you answered yes to any of the previous questions, provide full details below including, with respect to court actions, the date, offense in question, and the address of the court involved. Attach additional sheets if necessary. Conviction or disposition of a crime is not an automatic bar to employment.

My signature below constitutes authorization to check my employment history, including without limitation, criminal arrest and conviction records checks, reference checks and release of investigatory information possessed by any state, local or federal agency. I further authorized those persons, agencies or entities that the Town of Stonington contacts in connection with my employment application to fully provide the Town of Stonington any information on the matters set forth above. I expressly waive in connection with any request for or provision of such information, any claims, including without limitation defamation, emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the Town of Stonington, its agents and officials or against any provider of such information. I understand that information submitted in and with this application may be disclosed to a screening and/or interviewing committee, which may include board members, administrators, and other staff, and members of the community. I give my consent to this disclosure.

Please note: Employment cannot be finalized until the applicant has completed requirements for complete background checks.

Signature: _____

Printed Name: _____

Date: _____

All application materials become the property of Stonington Volunteer Fire Department. None will be returned. Providing any false information or misleading information on this membership application or membership screening process shall be fully sufficient grounds to refuse to accept application or, if the applicant has been accepted, to immediately dismiss the applicant/membership.