Swisshome-Deadwood Rural Fire Protection District

Volunteer Application

Applicant Information						
Full Name:					Dat	e:
	Last First			M.I.		
Address:						
Audress.	Street Address					Apartment/Unit #
						,
	City				State	ZIP Code
Person to contact in an emergency				Phone Numbe	r	
Time living at the Date of above address:		Birth:		Age as of January 1 st of current year:	the	
Phone:			Email	_ •		
	rity Number:					
(for backgro	рипа спеск) 				_	
Driver's Lice Number:	ense State and			Expiration Date:		
Number.	_			_		
Have vou ev	ver had vour					
Have you ever had your YES Icense suspended or		NO	If yes, explain:			
revoked?						
Have you ev	ver been	YES	NO	When?	Where?	
convicted of	f DUI or DWI?					
Have you ever been known by any name other than the one used on this application?			Other names u	Other names used:		
		YES	NO			
application						
			YES	NO		YES NO
Are you a citizen of the United States?					authorized to work in the	U.S.?
Have you lived outside of the State of						
Oregon for more than six months in the last			YES	NO If yes, date(s) an place(s)	nd	
five years?				P		

Have you ever volunteered or worked for a fire department or EMS provider?				NO	If yes, where and when? Reason for leaving?		
Do you currently hold any fire or EMS certifications or licenses?			YES	NO	Certification/Licensing State and Number:		
Have you ever been arrested?	YES	NO	If yes,	expla	in:		
Have you ever been convicted of a felony?	YES	NO					
Do you have any allergies?	YES	NO					
Do you have any medical restrictions or required accommodations?	YES	NO					
Please list up to three	personal r	eference	s that v		erences y contact:		
Full Name:						Relationship:	
Company:						Phone:	
Address:							
Full Name:						Relationship:	
Company:						Phone:	
Address:							
Full Name:						Relationship:	
Company:						Phone:	
Address:							

Previous Employment

Company:	Phone:					
Supervisor/Company Contact Information:						
Responsibilities:						
From: To:	Reason for Leaving:					
May we contact your previous employer for a reference?	YES	NO				
Militar	y Service					
Branch:		From:	То:			
Rank at Discharge:	_ Type of	Discharge:				
If other than honorable, explain:						
Disclaimer	and Signa	ture				
I certify that my answers are true and complete to the be	est of my kn	owledge.				
If this application leads to a position with the Swisshome information in my application or interview may result in r						
Signature:	Date:					
All applicants may be subject to a full background about			ahama Daadwaad Bural Eira			

All applicants may be subject to a full background check at the discretion of the Swisshome-Deadwood Rural Fire Protection District.