Jamestown Rural Fire Department

Membership Application

**Personal Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Name (Last, First) | | Date | |
| Address | City | State | Zip |
| Main Contact Numbers (Home, Cell, Work) | | Emergency Contact | |
| Email Address | | Date you can start | |
| Position Applying For | | Any physical limitations?  [ ] YES [ ] NO | |
| Are you currently employed? If yes, may we contact your employer?  [ ] YES [ ] NO [ ] YES [ ] NO | | Have you been a member of any fire department before?  [ ] YES [ ] NO | |
| Have you ever applied with us before or been a member of JRFD before?  [ ] YES [ ] NO (If yes, when: ) | |  | |
| If requested would you be willing to take a drug/alcohol screening exam?  [ ] YES [ ] NO | | | |
| Are you at least 18 years old?  [ ] YES [ ] NO | | | |
| Can you provide documented proof of US Citizenship?  [ ] YES [ ] NO | | | |
| Have you been convicted of a misdemeanor or felony in the past 7 years? (If yes, explain. Also, note if there are any charges pending in court.)  [ ] YES [ ] NO Additional Information: | | | |

Driving Information:

|  |  |
| --- | --- |
| Drivers License Number and state issued:  #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Do you have a reliable vehicle that you can operate to respond to emergency calls?  [ ] YES [ ] NO |
| What class of drivers license do you have?  Any restrictions on your license?  If yes, list all: | Do you have liability insurance?  List insurance company name & phone: |
| Do you have any motor vehicle violations in the past 3 years in any state?  If yes, list all details: | |
| Have you had any motor vehicle accidents in the past 3 years in any state?  If yes, list all details: | |

**Education and experience:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | School Name, City and State | # of years attended | Did you graduate | Major Subjects, special courses, or degrees |
| High School |  |  |  |  |
| College or University |  |  |  |  |
| Graduate School |  |  |  |  |
| Other |  |  |  |  |
| Military Service | (List any past or present military service and a supervisor contact) | | | |
| Fire Service Experience | (List previous fire dept name an contact information) | | | |

**Work History: (List only the past 3 years)**

|  |  |  |  |
| --- | --- | --- | --- |
| Company Name | Job Title | Employment Dates | Telephone Number |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Personal References:** Provide a minimum of two people who can provide personal or professional references.

|  |  |  |  |
| --- | --- | --- | --- |
| First and Last name | City and State | Relationship to you | Telephone Number |
|  |  |  |  |
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|  |  |  |  |

**Certificate of applicant** *(Read carefully before submitting your application. If submitting electronically, the signature is implied and you will be asked to physically sign at a later date if your application is accepted.)*

All information provided by me is true and correct to the best of my knowledge. I understand omissions or misrepresentations may result in rejection of my application or if a member, may result in subsequent dismissal. I hereby authorize all former employers, educational institutions, personal references and others identified hereon, including their employees or representatives, to furnish or provide full and complete reports, documents or information to Jamestown Rural Fire Department or its representative concerning my prior educational and work histories, criminal and driving records, or other information I have provided hereon. I waive, release, indemnify and hold harmless Jamestown Rural Fire Department, its subsidiaries or affiliate entities, employees, members and representatives and all other persons or entities from all liability and all claims of any nature whatsoever pertaining to the disclosure or use of information or written material as described above. I understand this is a preliminary application and not a contract. Furthermore, in the event I am accepted as a member, my status shall be completely voluntary and may be terminated at will at any time by myself, the fire department general membership, the fire chief, or the Jamestown Rural Fire Protection District as stipulated in our operating by laws. If accepted, I agree to comply with all rules of the organization as a condition of continued membership and/or affiliation. This institution is an equal opportunity provider.

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Please either email this completed application to** [**firehall@jrfd.org**](mailto:firehall@jrfd.org) **or mail to us at: JRFD, PO Box 785, Jamestown, ND 58401)**