



Liberty Joint Fire District Application for Membership



I, _____, being a member in good standing of the Ontario Hose Co. # 3 Inc hereby propose _____, for membership in the Ontario Hose Co. # 3 of the Liberty Fire Department.

Signature of Proposer

Date

Following to be filled out by applicant.

1. Last Name: _____ First Name: _____ MI: _____

Age: _____ Date of Birth: _____ Social Security #: _____

(Optional)

2. Address: _____ ZIP: _____

3. Telephone: (home) _____ (Work) _____

4. How long have you lived at present address: _____ In New York State: _____

5. Is additional information about a change in your name or your use of an assumed name or nickname necessary to enable a check on your eligibility for membership

Yes: _____ No: _____ If yes, explain: _____

6. Are you currently employed: Yes: _____ No: _____ Occupation: _____

If yes, give employer information: Company/Employer: _____

Address: _____ Phone # : _____

May we Contact him/her for a reference: Yes: _____ No: _____

7. Do you have a valid New York State Drivers License: Yes: _____ No: _____ If yes Class: _____

Driver License ID #: _____

8. Please indicate your availability to participate in normally required fire department activities such as

Drills, Training, Emergency Calls, Meetings :

Week Days: Days _____ Evenings _____ Nights _____

Week Ends: Days _____ Evenings _____ Nights _____

9. List any previous emergency services experience (include any Fire, EMS or Police agencies) that you May have belonged to: (If more space is needed use back of this sheet to list)

A. Name of Agency: _____ Type: _____

Address: _____ Phone: _____

B. Name of Agency: _____ Type: _____

Address: _____ Phone: _____

10. Have you ever been a member of the Armed Forces of the United States: Yes _____ No _____

If yes did you receive a Dishonorable Discharge: Yes _____ No _____ If yes give details on the back of this form. A Dishonorable Discharge is not a bar to membership. This and other factors will effect a final membership decision.

11. Have you ever been convicted of or plead guilty to a felony, misdemeanor, insurance fraud, arson or a

Reduction of one of these offenses: _____ Yes _____ No If yes, give details on the back of this form: **Note:** A conviction for the crime of arson prohibits membership in a Fire Company or Fire Department.

12. Please list three personal references, other than members of this organization who have known you for at least three years:

A. Name: _____ Telephone: _____

Address: _____

B. Name: _____ Telephone: _____

Address: _____

C. Name: _____ Telephone: _____

Address: _____

13. Please list names of any acquaintance that are members of this organization: _____

14. OSHA Regulations require that you pass a physical examination commensurate with your duties as a Firefighter and in particular for an interior structural firefighter. The Department's Physician will provide you with a free medical examination. Will you be willing to undergo a medical examination.

_____ Yes _____ No Within the Freedom of Information Law, all information contained or obtained herein will remain confidential and will be used only for Internal membership processing.

I have been provided a copy of the Company By-Laws that I am applying for membership to and a copy of the Liberty Joint Fire District's Code of Ethics. I have read and understand all the duties and responsibilities of a member. I feel I can contribute to the _____, and will abide by the Company By Laws and the Liberty Joint Fire District Policy.

In Witness, whereof, this application has been subscribed to this _____ Day of _____ 20____
By the undersigned applicant who affirms that the statements made herein are true under the Penalty of Perjury.

Applicants Signature: _____ Date: _____

Witnessed by (Signature): _____ Date: _____

Privacy Notification: Section 94 of the Public Officers Law (Personal Protection Law) requires that you be notified of the following facts when information which will be maintained in a record system is collected from you:
1. The authority to request and confirm personal information about you is found in Article 6 of the NYS Executive Law.
2. The information obtained will be: (a) used to determine your qualifications for the position you are applying for, (b) released to the Fire Chief and your potential supervisors and (c) maintained in your personal file (if you become a Fire Company or Department member), or in our resume file for six months (if you do not become a Fire Company or Department member.

Failure to provide the information or authorization will result in your application not being Considered for membership

This information will be maintained by the _____, of the Liberty Joint Fire District, 256 Sprague Ave., Liberty, NY 12754



**Liberty Joint Fire District
Application for Membership**



I, _____, being the parent or guardian of,
_____ hereby grant permission for _____

apply for membership and join the Ontario Hose Co. # 3, of the Liberty Fire Department as a Cadet Member in said Company and Department.

It is understood that as a parent or guardian you may withdraw your consent at any time prior to his or her 18th. Birthday and the withdrawal of such consent would terminate his or her membership in said Company and Department. Upon the applicant becoming 18 years of age at his or her request they would become a full member in said Company and Department..

DATE: _____

SIGNATURE

_*****

RELATIONSHIP

THIS FORM TO BE FILED WITH APPLICANTS FULL APPLICATION