



BEN WHEELER VOLUNTEER FIRE DEPARTMENT MEMBERSHIP APPLICATION

PO Box 396, Ben Wheeler, TX 75754 ▪ info@BenWheelerFD.org

Positions applying for: First Responder (Fire/Rescue/EMT) Support Services

| BASIC REQUIREMENTS FOR MEMBERSHIP | |
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| <ul style="list-style-type: none"> Must reside/work within Van Zandt County Must be at least 18 years of age Must have a high school diploma or GED | <ul style="list-style-type: none"> Must have acceptable background/driving record Must not have any felony convictions Must not have any class "A" or "B" misdemeanor convictions within the last 5 years |

| MAINTAINING ACTIVE MEMBERSHIP | |
|--|--|
| <ul style="list-style-type: none"> Attend all regular scheduled meetings Maintain acceptable level of participation Adhere to all rules and regulations of the department | <ul style="list-style-type: none"> Maintain acceptable driving record Maintain liability insurance on personal vehicles Meet department training requirements |

| CONTACT INFORMATION | | |
|---------------------|--------------|-----------|
| Last Name | First | Middle |
| Address | City | State/Zip |
| Cell Number | Other Number | |
| Email Address | | |

| AVAILABILITY | |
|--|--|
| Are you legally authorized to work in the U.S.? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Do you have physical/mental limitations which may affect your assignment? <i>(Answering yes does not affect membership; however, it may impact your assignments.)</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, please explain: | |
| What hours are you available to respond to emergency calls? | |
| <input type="checkbox"/> 24/7 <input type="checkbox"/> Business hours <input type="checkbox"/> Non-Business Hours <input type="checkbox"/> Depends on work/family | |
| Please explain: | |
| How many miles do you live/work from the Firehouse? | |
| Can you attend monthly membership meeting second Tuesday at 7~9 pm? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If applying for First Responder, can you attend monthly training meetings? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Can you participate in community and fundraising functions such as Open House, Feral Hog Festival, Fish Fry, Pancake Breakfast, etc.? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Can you assist with maintenance/upkeep departmental duties such as mowing, vehicle maintenance, cleaning, purchasing supplies? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

EDUCATION/SKILLSHigh School: Diploma? Yes No GEDCollege/Trade School: Degree? Yes No

Firefighter, EMS, First Aid or CPR training? If yes, please list expiration date of certification.

Please indicate your skills/experience that will contribute to the department:

 Firefighter/EMT/Emergency Services Marketing and Social Media Event Planning/Fundraising/Grant Writing Mechanical (Vehicle/Facilities) Maintenance Administrative/Clerical/Computer Catering/Cooking

Please list additional skills/experience:

EMPLOYMENT/MILITARY SERVICE

Current Employer

Address

City

Zip

Job Title

Date Employed

Supervisor's Name

Supervisor's Number

Hours worked

Do you travel for your job?

 Yes NoMay we contact your employer? Yes No If no, why?

List 2 previous employers

Military Service

BACKGROUND/DRIVING RECORD CHECKDo you agree to a background and driving record check? Yes No *By signature below.*

Driver's License Number

State of Issuance

Driver's License Class A B C:

Truck driving experience?

 Yes NoTruck/equip driving experience? Yes No

If yes, type of vehicle?

SS Number

Date of Birth

PERSONAL DECLARATIONS Yes No Have you ever been convicted of a felony? Yes No Have you been convicted of a "Class A" misdemeanor within the past 5 years? Yes No Have you been convicted of a "Class B" misdemeanor within the past 5 years? Yes No Have you been convicted of a DWI or DUI within the past 2 years? Yes No Are you on probation?

Comments:

PERSONAL REFERENCES

| Name | Relationship | Contact Number |
|------|--------------|----------------|
| | | |
| | | |
| | | |

I Hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and application, and the answers provided are true and complete to the best of my knowledge. I am fully aware that any such misrepresentations, omissions, or falsifications will be grounds for immediate rejection of application or termination of membership. I also understand that I will be on probation until duly voted in as a member. Any violations of the By-Laws, SOPs, or misconduct in the department or community may be grounds for termination of my membership. I understand that any equipment or property issued to me is the property of the Ben Wheeler Fire Department, to be returned if I should leave the department.

Applicant Signature: _____ Date: _____

Printed Name: _____