

Marshfield Fire Department

Application for Volunteer Firefighter/First Responder

Michael Taylor, Fire Chief

Date _____

Name _____

Address _____

Phone
Number _____ Cell _____

Social Security # _____ Drivers License # _____

Are you a citizen of the United States? Yes _____ No _____

Are you available to respond to calls? Days _____ Nights _____

Position applied for? _____

Referral Source: _____

Have you ever been on a fire department before? Yes _____ No _____

Do you have any relatives or friends on Marshfield Fire
Department? _____

Have you ever been convicted of or plead guilty to a felony? Yes _____ No _____
If yes explain _____

Do you have any physical, mental, or medical impairment or disability that would limit
your job performance in the fire department? Yes _____ No _____
If yes explain _____

Do you give this department permission to run a driving /criminal records check on you?
Yes _____ No _____ DOB ___/___/___ Initials _____

Please attach a copy of your current driver's license and automobile insurance to this
application.

Education



	High	College/University	Graduate/professional
School Name:			
Years completed	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/degree			
Describe Course of study:			
Describe specialized training:			
Skills and extra curricular activities			
Honors Received:			

Please provide two personal references that we may contact:

Name	Relationship	Phone Number
1. _____	_____	_____
2. _____	_____	_____

Please list any emergency service organizations that you have been affiliated with:



Agreement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the organization.

I further understand that it is my responsibility to maintain confidentiality of departmental information. I certify that I have read and understand the above agreement.

X _____ Date _____
Signature of Applicant

Marshfield Fire Department

Volunteer Firefighter Requirements

1. Applicant shall be at least eighteen years of age, 14 years of age if Cadet Applicant.
2. Applicant shall be a resident within the Marshfield Fire District.
3. Applicant must possess a valid Driver's License.
4. Applicant must possess proof of automobile insurance.
5. Applicant must be of good character and have an acceptable criminal background.
6. Applicant background investigation criteria for rejection:
 - Any Felony conviction.
 - Any recent criminal activity, which is determined by the Fire Chief to be undesirable.
 - Any current or recent suspension or restriction of driver's license, which is the result of legal action.
 - Background will be investigated by the Marshfield Police Department.
7. Applicant must be in good physical condition:
 - Must be able to balance, bend, crouch, kneel, stoop, crawl or climb under, over obstacles.
 - Must be able to frequently lift and/or carry objects weighing 25 pounds or more (may be required to occasionally lift and handle objects up to 100 pounds).
 - Must be able to work and feel with fingers, hands and arms to operate tools, controls, and objects and to reach with hands and arms.
 - Must be able to walk up and down stairs and utilize protective equipment, including eye wear, footwear, respiratory aid, hard hat, gloves, and protective clothing.
 - Reasonable accommodations may be made to enable individuals with disabilities to perform the essential job functions.
8. Applicant must be of good moral character and have acceptable student or work references.
9. Any use of drugs or alcohol while on duty with the Marshfield Fire Dept. will be grounds for immediate dismissal.
10. Probationary firefighters are not allowed to drive fire apparatus, drive code 3, and must obey all traffic laws when responding to a call or station. The use of four-way flashers while driving to a call or station is prohibited.

Participation Requirements

1. Members of the Marshfield Fire Department shall be required to meet minimum participation standards. Failure to meet these requirements shall be grounds for termination.
2. Members must complete a six month probationary period, meeting all standards of the Marshfield Fire department in order to be commissioned as a firefighter by the Fire Chief and Board of officers.
3. Members shall respond to a minimum of 12 fire Department events and at least 3 Scheduled training/general meetings and at least 1 battalion meeting each quarter of the calendar year.
4. EMS providers and firefighters are expected to participate in the nightly on-call program as dictated by department policy.
5. Members shall actively participate in all training sessions.
6. All firefighters must attend a 40 hour basic firefighter course within 1 year of joining the department or as classes are available.
7. Members shall participate in all meetings called by the Fire Chief or officers acting on the chiefs behalf, unless excused in advance by the Chief or Assistant Chief.
8. Members shall attend Basic Firefighter training given by the Marshfield Fire Department or other area department as soon as possible after being accepted as a new member.
9. Members shall sign this form stating that they understand all requirements and have been given the opportunity to ask questions of the Fire Chief or other officers representing the Fire Chief.

I UNDERSTAND ALL OF THE ABOVE AND AGREE TO ACCEPT AS WRITTEN. I UNDERSTAND THAT ANY VIOLATION OF THE ABOVE WRITTEN POLICY WILL RESULT IN MY IMMEDIATE TERMINATION.

Applicant _____ Date _____

Officer _____ Date _____

Authorization for Background Check (Consumer Report)

Having read and signed the Disclosure To Subject (Consumer) of a Background Check (Consumer Report), I authorize **Marshfield Fire Protection District** to obtain and rely upon consumer reports or investigative consumer reports in considering me for employment or volunteering and, if I am employed, in considering me for subsequent promotion, assignment, reassignment, retention, or discipline. By my signature below, I authorize **Marshfield Fire Protection District** to obtain any such reports and to share the information received with any person involved in the employment decision.

PLEASE INITIAL: I do _____ do not _____ authorize you to contact *my current* employer for Employment and Reference Verifications

PLEASE INITIAL: I do _____ do not _____ agree to receive all communications regarding any consumer report or investigative consumer report as may be required by the Fair Credit Reporting Act or such other state or local laws via email at your designated email address.

PLEASE INITIAL: I do _____ do not _____ agree that this Disclosure and Authorization in original, faxed, photocopied, or electronic (including electronically signed) form will be valid for any consumer reports or investigative consumer reports that may be requested about me by or on behalf of the Company.

_____/_____/_____
Printed Name of Subject (Consumer) **Date**

Signature of Subject (Consumer) **E-mail:** _____
(For Official Correspondence)

Personal Search Criteria (Please Print Clearly)

First Name **Middle Name** **Last Name**

Alias/Maiden Name(s) **Race:** _____

_____-_____-_____
Social Security Number **Date of Birth** **Gender:** Male Female

_____/_____
Driver's License Number/State **Phone Number**

_____(____)_____
Address (Years Resided) **City** **State** **Zip**

Cities Resided In Last Seven Years:

I certify that all elements of the personal search criteria I have provided are true, accurate and complete. I understand and agree that any omission, false statement, misleading statement, or answer made by me on my application or any supplements to it and in any interviews will be sufficient grounds for rejection of employment and my discharge after employment.

Printed Name **Signature** **Date**

Disclosure To Subject (Consumer) of a Background Check (Consumer Report)

Disclosure

In considering you for employment and/or Volunteering, if you are employed, in considering you for subsequent promotion, assignment, reassignment, retention, or discipline, **Marshfield Fire Protection District** may request and rely upon one or more consumer reports or investigative consumer reports about you that we obtain from a consumer reporting agency.

Definition

Consumer Report - a “consumer report” is a written, oral or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in making an employment-related decision about you.

Types of consumer reports include Credit Reports, Sex Offender Registry, Federal Criminal, Driving Records, Address/Alias/SSN verification, Statewide Repository Criminal, County Criminal, Government Watch Lists, Civil Records, Professional License Verification, Education Verification, or any other Federal, State, County or any other agency that maintain information considered a consumer report.

Investigative Consumer Report - an “investigative consumer report” is a consumer report in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your prior employers, neighbors, friends, public information found on social media, associates, or with others who may have knowledge concerning any such items of information.

Types of investigative Consumer Reports include Personal Character Reference, Professional Character Reference, Previous Employment Verification or public information found on social media.

Before **Marshfield Fire Protection District** can obtain a background check/consumer report this disclosure must be provided to you along with “A Summary of Your Rights Under The Fair Credit Reporting Act.” In addition, **Marshfield Fire Protection District** must have your signed authorization.

PLEASE INITIAL _____ I acknowledge I have read and received this Disclosure by **Marshfield Fire Protection District** to obtain a background check (consumer report).

PLEASE INITIAL _____ I acknowledge I have received a copy of “**A Summary of Rights Under The Fair Credit Reporting Act.**”

Printed Name of Subject (Consumer)

Signature of Subject (Consumer)

_____/_____/_____
Date