

Fairfax Volunteer Fire Department, Inc.

4081 University Drive
Fairfax, Virginia 22030

APPLICATION FOR MEMBERSHIP

Last Name:		First Name:		Middle Name:	
Address:		City:	State:	Zip:	
SSN:		DOB:	Home Phone:		
Cell Phone:		Email:			

EDUCATION

GRADES 1-12: Highest Completed: _____
 College Completed ____yrs. Trade School: _____
 Major subjects in college or trade school: _____

GENERAL INFORMATION

Color eyes: _____ Color Hair _____ Sex: _____
 Height: _____ft. _____in. Weight: _____lbs.
 Place of Birth: _____
 Marital Status: _____
 Spouse's Name: _____

FIRE DEPARTMENT INFORMATION

Have you ever been a member of another Fire Department or Rescue Squad? _____
 If yes, where? _____
 Have you ever been removed from or refused membership in another department? _____
 What special fire and/or emergency medical training do you have that might make you a valuable member of this department? _____

EMPLOYMENT

Present employer: _____
 Address: _____

 Type of Work: _____
 Date Hired: _____
 Previous employer (if less than 3 yrs with present employer): _____
 Type of Work: _____
 Dates worked: from: _____ to _____
 Why left: _____

MEDICAL AND EMERGENCIES

Do you have any physical defect, disability, or disease that might hamper full fire department participation? _____
 Have you ever had epilepsy or any other mental or nerve ailment, or been a patient in an institution for treatment of such an ailment or disorder?

 Family Doctor: _____
 Notify in case of an emergency:
 Name: _____ Relation: _____
 Phone Number: _____

BACKGROUND INVESTIGATION

Do you have any objection to this department checking with present or former employers as to your character and qualifications?

YES NO

Have you ever served in the Armed Forces?

YES NO

If not now in military, was your separation under other than honorable circumstances?

YES NO

Prior to submission of this application, have you known any member of this department?

YES NO

If yes, who:

Vehicle Driver's License Number:

_____ State _____

Have you ever been arrested for any law violation, other than minor traffic violations? _____

If yes, explain fully using additional sheets of paper if needed.

I declare that all statements made by me on this application are true and correct to the best of my knowledge. If elected for membership in the Fairfax Volunteer Fire Department, I promise to abide by the by-laws and published regulations of the department to the best of my ability.

Date: _____ Signature: _____