



Volunteer Application Options

Active or Junior (14-17 years old) circle one.

Personal Information

Full Name (required) _____

Birthday (required) _____

Cell phone (required) _____

Cell phone provider for I am responding (required) _____

Last 4 of Social Security # (required) _____

Street Address (required) _____

Your Email (required) _____

Are you a U.S.citizen?

Yes No

Is the address above your permanent address?

Yes No

Have you ever been convicted of a crime?

Yes No

If yes, please explain: _____

Do you have a driver's license?

Yes No

Has your driver's license ever been suspended?

Yes No

If yes, please explain:

Employment

Current Employer _____

Years at this company _____

Employer's Address _____

Employer's Phone Number _____

Position/Job Title _____

Previous Employer _____

Years at this position _____

Previous Employer's Address _____

Previous Employer's Phone _____

Job Title _____

Military

Have you ever served in the U.S. Armed Forces?

Yes No

If Yes, what branch? _____

How many years? _____

Type and date of discharge _____

List any special training _____

Education

Name of High School you attended _____

Dates Attended _____

Vo-Tech or Trade School _____

Dates Attended _____

College Attended _____

Dates Attended _____

Degrees Earned _____

Major Studies _____

General Information

List any special skills or certifications you have which would be of benefit to BTVFC

What are you interested in?(circle all that apply)

EMS, Fire, Fire Police

Why do you want to join a volunteer Organization?

Are you currently or have you ever been a member of a volunteer organization such as BTVFC? _____

If yes, name of organization _____

Person in charge _____

Phone Number _____

Do you know a member of BTVFC?

Yes No

If yes, name of BTVFC member _____

List 3 personal references:

Reference 1:

Name _____

Phone _____

Address _____

How long have you known this person? _____

Occupation _____

Reference 2:

Name _____

Phone _____

Address _____

How long have you known this person? _____

Occupation _____

Reference 3:

Name _____

Phone _____

Address _____

How long have you known this person? _____

Occupation _____

Statement of Certification - Signature

I, the undersigned, hereby claim that, to the best of my knowledge, all information provided in this application is true and correct. Further, I understand that any information which has been given incorrectly is cause for rejection or dismissal from the company. Permission is hereby granted to Bethlehem Township Volunteer Fire Co.,Inc. to contact any and all persons listed on this application, and any government agency which may have knowledge of my background.

Your Name:

Date

Emergency Contact Information

Name _____

Phone _____

Address _____

Relationship _____

Other _____