

Town of Madison Fire Department
Volunteer Firefighter Application

Full Name _____ Date _____

Home Address _____ City _____ Zip _____

Home Phone _____ Work Phone _____

Place of Employment _____ Business _____

Are you 18 years old or older? _____

Do you have a valid drivers License? _____

Please indicate the state and Drivers license# _____

How long have you lived at your present address? _____

What was your previous address (if less the 3 years) _____

How long do you plan to reside in the Madison area? _____

Please indicate your hours of availability? _____

Education (list most recent training/education first)

Are you employed? _____ Student? _____ Where? _____

Address of employer or school _____

What is your position/ field of study? _____

Do you have certification as a firefighter? _____

If not could you obtain this certification within one year of acceptance into this organization? _____

Have you ever been convicted of a crime, excluding misdemeanors and minor traffic violations? A conviction will not necessarily bar you from consideration from this association. Yes ___ No ___

If yes, please describe in full _____

It is hereby understood that your criminal history and traffic violation record shall be checked by the Town of Madison Fire Department and their findings will become a part of this application.

Do you have experience as a Firefighter? _____

If yes, where were you a Firefighter? _____

Who or what prompted you to apply for membership in the Town of Madison Volunteer Firefighters Association?

Please list 3 references with name, address, phone, and relationship.

Have you ever served in the U.S. Military? _____ Yes _____ No
In case of emergency, contact name, address, and Phone #

The information submitted is accurate and verifiable to the best of my knowledge. I understand that any false or missing information may disqualify me for membership to this organization. If accepted to active membership I agree to abide by all the laws, rules, and regulations of this department and obey all reasonable orders given to me by any of my superior officers.

Signature

Date

The Town of Madison is an equal opportunity employer. It is our policy to comply fully with federal and state fair employment laws prohibiting discrimination because of age, race, creed, color, handicap, sex, national origin, ancestry, marital status, sexual orientation or arrest or conviction record. (WI ss 111.31, etseq.) and information requested on this application will not be used for any purpose prohibited by law.

Date received: _____

Date interviewed: _____

Interviewed by: _____

Accepted: _____ Rejected: _____

Reason for rejection: _____

Name of Fire Chief, Town of Madison: _____