



Elkridge Volunteer Fire Department, Inc.

Application for Membership

Last Name First Name Middle Name

Address

City State Zip Code

Telephone Number Cell Number Date of Birth

Email Address

Interested in: Fire EMS or Both Date of Application
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Do you possess a valid motor vehicle operator's license? Yes No

Driver's License Number _____

State of Issue _____ Type/Class _____

Have you ever completed an application with Elkridge Volunteer Fire Department? Yes No

Have you ever been a member of any Volunteer Fire Department? Yes No

If Yes, Name of Department _____

Since your eighteenth (18th) birthday and while you were represented by an attorney or after knowingly and intelligently waiving your right to an attorney, have you ever been convicted of a crime? Yes No

Would you be willing to consent to the following medical examinations and release the results to the Chief of the Elkridge Volunteer Fire Department, Inc?

- a. A complete physical examination? Yes No
- b. A drug and alcohol screening test conducted by a certified medical laboratory? Yes No

References

Give name, address and telephone number of three references that are not related to you. References forms will be mailed to each person for completion.

- 1. _____
- 2. _____
- 3. _____

Have you ever served or are you currently serving in the United States military? Yes No

If yes, which branch _____

Type of Discharge _____

Employment Experience

Employer	
Address	
Telephone Number	Supervisor Name

Special Skilled and Qualifications

Summarize special skills and qualifications acquired from employment or other experience.

Please read the following and answer each question as to how well you believe you meet the requirements or personal traits described.

High Average Low

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All Volunteers are in a position of public service and trust. You will have access to people's medical records, homes and personal belongings. Therefore, they must possess a high level of personal integrity, honesty, professionalism and discretion.

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All Volunteers will be dealing with the general public under very stressful conditions, and must possess the ability to work well and maintain their composure under pressure, as well as be able to communicate personably and clearly with victims, patients, and their friends/family members during emergency incidents.

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Firefighter and EMT Volunteers must completed over 160 hours of training during their first year and must possess excellent study skills, effective comprehension of written and verbal communications, and be responsible for attending all classes on time and completing all required class work and tests. They must also be able to retain and apply their knowledge and training on emergency incidents.

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Volunteers must be able to complete all required training, drills, and duty nights with minimal guidance and reminders, and must take the initiative to seek out assistance when needed to meet their requirements.

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In additional to completing required training, all volunteers must regularly attend at least one duty night per week, and monthly meetings and drills.

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Volunteers must be able to get along with all types of people, personalities, and interpersonal situations - both with other members and the general public. They must be able to do so with outstanding judgment and tact.

Member's Statement

I, undersigned, agree to become an active member of the Elkridge Volunteer Fire Department, Incorporated, if I am accepted for membership.

I, the undersigned, do promise to abide by the Articles of Incorporation, By-laws, rules, and regulations of the Elkridge Volunteer Fire Department, Incorporation either in effect or hereafter adopted.

I, the undersigned, understand that the Elkridge Volunteer Fire Department, Incorporated at its expense may undertake an investigation into my background and that I will be required to appear before the Membership Committee of the Elkridge Volunteer Fire Department as a part of the investigation. I hereby authorize any person or entity contacted by the Elkridge Volunteer Fire Department, Incorporated to disclose any and all information and/or records regarding me to the Elkridge Volunteer Fire Department, Inc.

I, the undersigned, understand that should my application for membership be accepted by the membership of the Elkridge Volunteer Fire Department, Inc., I shall be on a probationary period not less than six (6) months and no more than twelve (12) months; beginning on the initial vote date, and ending twelve (12) months later or until I have successfully completed a training course to perform as a Firefighter or Emergency Medical Technician. A probationary member who has formal training as a Firefighter or Emergency Medical Technician may be eligible for Active Membership after a six (6) month period. A Probationary Member who has no such training shall remain in probationary status for a period of twelve (12) months.

I, the undersigned, understand that any false statement made on this Application for Membership, shall constitute good cause for the rejection of my Membership Application or my immediate expulsion from membership in the Elkridge Volunteer Fire Department, Inc.

I, the undersigned, understand that as a condition of membership I will be required to participate in training, meetings, and fundraising functions.

I, the undersigned, hereby declare and affirm under the penalties of perjury that all of the information and responses provided by me in the Application of Membership are true and correct to the best of my personal knowledge and belief.

IN WITNES WHEREOF, I, The undersigned, hereby apply for membership in the Elkridge Volunteer Fire Department, Incorporated and affix my hand seal on this _____ day of _____, 2____.

Witness

Application's Signature

Witness

Signature of Parent or Guardian of
Applicant, if under the age of
Eighteen (18) years.

For Membership Committee Use Only

Date Received: _____ Date of Interview: _____

Interviewed by: _____

Remark: _____

Sponsors

The undersigned member is in good standing and hereby sponsor the above named applicant for membership in the Elkrige Volunteer Fire Department, Inc.

Sponsor's Signature