KEARSARGE FIRE DEPARTMENT

Membership Application



APPLICANT INFORMATION							
Last Name				M.I.	Date		
Street Address				Apartment/Unit #			
City			State		ZIP		
Phone			E-mail Address				
Date of Birth	Social Security No.			Driver's License or State ID Number and State			
Referred By							
Are you a citizen of the United States?	YES 🗌 🛛 N	10 🗌	If no, are you authoriz	zed to w	ork in the U.S.?	YES 🗌	NO 🗌
Have you ever been convicted of a misdemeanor or a felony?	YES 🗌 🛛 N	10	If yes, explain				

Please attach a copy of the driver's license to the application.

EDUCATION						
High School			Address			
From	То	Did you graduate?	YES 🗌	NO 🗌	Degree	
College			Address			
From	То	Did you graduate?	YES 🗌	NO 🗌	Degree	
Other			Address			
From	То	Did you graduate?	YES 🗌	NO 🗌	Degree	

REFERENCES					
Please list three professional references.					
Full Name	Relationship				
Company	Phone ()				
Address					
Full Name	Relationship				
Company	Phone ()				
Address					
Full Name	Relationship				
Company	Phone ()				
Address					

PREVIOUS EMPLOYMENT					
Company			Phone ()	
Address			Supervisor		
Job Title			·		
Responsibilities					
From	То	Reason for Leaving			
May we contact your previous supervisor for a reference? YES NO					
Company			Phone ()		
Address			Supervisor		
Job Title			·		
Responsibilities					
From	То	Reason for Leaving	J		
May we contact your previous supervisor for a reference? YES NO					
Company			Phone ()		
Address			Supervisor		
Job Title					
Responsibilities					
From	То	Reason for Leaving	J		
May we contact your previous supervisor for a reference? YES NO					

PREVIOUS FIRE / EMS / RESCUE EXPERIENCE					
Company/Department	From	То			
Current Certifications					
Please attach certificate copies to the application.					

DISCLAIMER AND SIGNATURE

Kearsarge Fire Department is committed to the concept and practice of equal opportunity for membership and achievement without discrimination because of race, color, religion, national origin, sex, handicap, age, sexual orientation, political affiliation, status as a protected veteran, or any characteristic against which discrimination is prohibited by applicable law.

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

If this application leads to membership, I understand that false or misleading information in my application or interview may result in my release.

Signature