



WEST PEND OREILLE FIRE DEPARTMENT VOLUNTEER APPLICATION

61 AIRFIELD WAY
PRIEST RIVER, ID 83856
208.448.2035

FULL LEGAL NAME: _____

HOME ADDRESS: _____

MAILING ADDRESS: _____

HOME PHONE: _____ CELL PHONE: _____

DRIVERS LICENSE NUMBER: _____ STATE: _____

EMPLOYMENT HISTORY

CURRENT EMPLOYER: _____ SUPERVISOR NAME: _____

EMPLOYER ADDRESS: _____ WORK PHONE: _____

HOW LONG HAVE YOU WORKED FOR THIS COMPANY?: _____

MAY WE CONTACT YOUR CURRENT EMPLOYER?: YES NO

PREVIOUS EMPLOYER: _____ SUPERVISOR NAME: _____

EMPLOYER ADDRESS: _____ WORK PHONE: _____

HOW LONG HAVE YOU WORKED FOR THIS COMPANY?: _____

REFERENCES

1. NAME: _____ PHONE NUMBER: _____

2. NAME: _____ PHONE NUMBER: _____

3. NAME: _____ PHONE NUMBER: _____

OFFICE USE ONLY:

Application Received by: _____ Date: _____

Accepted: YES NO Date: _____

Probationary Review Date: _____

SOP/Policy Packet Provided Date: _____

Security Code: _____ WP #: _____

Do you currently hold any medical or first aid certifications? If yes, please list certifications and expiration dates:

Please list any fire service training you have had. You will be asked to provide copies of all fire service certifications within 90 days of joining the Department.

Why do you want to join the Fire Department?

Have you ever been convicted of a crime (felony or misdemeanor)? If yes, please indicate date, charge, location, and disposition.

Please indicate the type of service you wish to provide to the district. Check all that apply.
(Note: This is a list of the different aspects of the Fire Department operations. By circling items on this list, you are not committing to anything. We would like to know your areas of interest. If you have any questions about the section, feel free to leave it blank and we will cover it during your interview.)

Structural Firefighting	Fire Cause Investigation	Fire Ground Support
Wildland Firefighting	Hazardous Materials	Data Entry
Aircraft Firefighting	Boat Operator	Public Education
Driver / Operator	Emergency Medical Services	Fire Code Inspection
Technical Rescue	Training Instructor	Extrication
Traffic Control	Other	

I HEARBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

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SIGNATURE	DATE