



STUDENT VOLUNTEER APPLICATION

APPLICANT INFORMATION

Full Name: _____ Date of Birth: _____
Last First

Physical Address: _____
Street Address Apartment/Unit #

Mailing Address: _____
City State ZIP Code

_____ *Street Address Apartment/Unit #*

_____ *City State ZIP Code*

Home Phone: _____ Cell Phone: _____

Email Address: _____ Date Available: _____

Do you have or can you obtain a Washington state driver's license? YES NO

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

SKILLS AND EXPERIENCE

Please indicate if you have any of the following skills or training:

- | | |
|---|--|
| <input type="checkbox"/> CPR | <input type="checkbox"/> Highway Safety and Flagging |
| <input type="checkbox"/> First Aid | <input type="checkbox"/> Communications and Radios |
| <input type="checkbox"/> Fire Safety Systems (alarms, extinguishers) | <input type="checkbox"/> Certified Trade (mechanic, electrician) |
| <input type="checkbox"/> Rescue Procedure (lifeguard, auto extrication) | <input type="checkbox"/> Occupational Health and Safety |
| <input type="checkbox"/> Commercial Driver's License (CDL) | <input type="checkbox"/> Other _____ |

Please explain any previous firefighter experience: _____

List below valid licenses or certificates of professional or vocational competence relevant to the position for which you are applying:

License/Certificate	License/Certificate Number	Expiration Date
1.		
2.		
3.		

EDUCATION

High School: _____ Highest Grade Level Achieved: _____

From _____ To _____ Did you graduate? YES NO Diploma: _____

College: _____ Course of Study: _____

From _____ To _____ Did you graduate? YES NO Degree _____

Other: _____ Course of Study: _____

From _____ To _____ Did you graduate? YES NO Degree _____

EMPLOYMENT

Please list any relevant (or most recent) employment:

Company Name: _____ From _____ To _____

Address: _____ Phone Number: _____

Supervisor: _____ May we contact for a reference? YES NO

Job Title: _____

Responsibilities: _____

Reason for Leaving: _____

Company Name: _____ From _____ To _____

Address: _____ Phone Number: _____

Supervisor: _____ May we contact for a reference? YES NO

Job Title: _____

Responsibilities: _____

Reason for Leaving: _____

Additional, relevant employment may be attached.

REFERENCES

Please list three professional references:

Full Name: _____ Relationship: _____

Company: _____ Phone Number: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone Number: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone Number: _____

Address: _____

MILITARY SERVICE

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable explain: _____

DRIVING RECORD

Full Name: _____
Last *First*

Driver's License Number: _____ State: _____

List all notices of infractions or traffic citations (other than parking tickets) that you have received within the last five (5) years:

<i>State</i>	<i>Month and Year</i>	<i>Type of Infraction</i>
--------------	-----------------------	---------------------------

1. _____

2. _____

3. _____

Infractions or citations will not necessarily remove you from consideration.

MISCELLANEOUS

How did you hear about this opportunity?

Word of Mouth: _____

- Website: _____
- Advertisement In: _____
- Social Media: _____
- Other: _____

NOTICES

The North Mason Regional Fire Authority (NMRFA) is an equal employment opportunity employer. All qualified candidates will receive consideration without regard to race, color, religion, sex, national origin, age, disability, marital status, political affiliation, sexual orientation or any other non-merit factor. NMRFA will reasonably accommodate candidates with disabilities as required by law.

NMRFA is a smoke and drug-free workplace.

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. I am not engaged in any outside activity or business that could be considered a conflict of interest with the NMRFA or those of its clients, nor will I become engaged in such activity or business if selected for the position for which I am applying.

For determination of my potential membership eligibility, I hereby authorize release of educational, police, criminal and employment information pertinent to the position for which I am applying and to contact any references I have listed within my application. I further authorize the North Mason Regional Fire Authority to rely upon and use, as it sees fit, any of the information received.

I hereby release all parties and persons connected with any such request for information from all claims, liabilities and damages for any reason arising out of furnishing such information. If employed, I release the NMRFA from any liability for future references it may provide regarding my employment with the NMRFA. Pursuant to RCW 43.43.834, background checks are available to the applicant upon request. It is my intention that any copy of this authorization is as valid as the signed original.

Signature: _____ Date: _____

Completed applications can be sent via email, fax, mail or hand delivered to:

**Attn: Angie McCormick-Executive Assistant
 North Mason Regional Fire Authority
 490 NE Old Belfair Hwy
 PO Box 277
 Belfair, WA 98528**

**Phone: 360-275-6711
 Fax: 360-275-6224**

Email: amccormick@northmasonrfa.com