

Volunteer Application

1. PERSONAL DATA

2.

Last Name:	First:	MI:
Address:		
City:	State:	Zip:
Mobile Telephone:	Home Telephone:	
E-Mail Address:		
	as or nickname by which you ar	
Sex: Male Female	Date of Birth: MonthI	DayYear
Citizenship: Citizen of U.S.A.	☐ Yes ☐ No	
Marital Status: Single	☐ Married ☐ Divorced	Widowed
If married, name of spouse:		
CONSENT FOR BACKGRO	UND CHECK	
•	to perform an investigation into	
Applicant's Signat	ure	Date

3. RESIDENCE RECORD

Starting with your present address, list each address at which you have resided in the past 10 years.

FROM	ТО	ADDRESS		CITY	STA
	PRESENT				
	4 EMEDO	CENCY NOTIFICATION	In case of amarganay natific		
	4. EMEKU	JENCY NOTIFICATION –	In case of emergency notify:		
	Name: _				
	Address	:			
		nship:			
			Telephone. (1	1)	
			,		
		(W			
		(C)			
	5. EDUCA	ATION RECORD – Where	did you recei ve your high	est level of for	mal
	education	on?			
	School:		Level	achi	eved:
	Address	:			
	Dates o	f attendance:	to:		

6.	EMPLOYMENT RECORD – List below your Company Name:					
	Address:				of Hire:	
	Supervis			Telephone	2:	
		of wor	k you perform		:	
	Numbers of hours per week: Hours of employment: From To					
	On what	days are you empl	oyed? ☐Mon ☐Ti	ues	∏Fri ∏Sat ∏Sun	
	On what	nights are you emp	ployed?	ues	□Fri □Sat □Sun	
7	. MILITAF	RY SERVICE RECO)RD			
		-	erformed on either action and in the military enter	•	ve or National Guard	
FROM	то	ACTIVE	BRANCH	RANK	TYPE AND DATE OF DISCHARGE	

	8.	LICENSE REC	CORD					
		Do you posses	s a valid North Carolina	a State Drivers License?	□Yes □No			
		If yes, complet	If yes, complete the following:					
		Type:		License Number:				
		Date Issued:		Expires				
		Has any driver ☐No	's license issued to you	ever been suspended or re	evoked?			
		If	yes, explain: V					
	9.	ARREST ANI	O SUMMONS RECOR	D				
		dismissed, exp		wise disposed of, and a	eatment arrests which were ny cases pending. If you			
DATE		LOCATION	ORIGINAL CHARGE	FINAL CHARGE	DISPOSITION			

List all summonses served upon you or on a vehicle owned by you, by a Law Enforcement Officer, Court or other authority in any state, for violation of parking regulations, traffic regulations, or laws, or any other crim inal law. If you have never received a summons or violation, enter "NONE"

DATE	LOCATION	ORIGINAL CHARGE	FINAL CHARGE	DISPOSITION		
1	0. MISCELLAN	EOUS – Answer all que	estions in space provided.			
	Are you willin	g to make personal sacr	rifices such as:			
	• Getting up in the middle of the night to answer alarms? Yes No					
	• Answering alarms in all types of weather?					
	Do you agree to be a probationary firefighter until initial training is completed?					
	□Yes □1	No				
	Do you agree to attend meetings and other functions of the Department?					
	□Yes □No					
	_	yes ☐No If yes, com	ny fire department or conplete the following:	n pany, either paid or		

DEPARTMENT NAME	CITY, STATE, ZIP	DATES MEMBERSHIP	OF	REASON FOR LEAVING

${f C}$	DEPARTMENT	YEAR
Do you have any First Aid	raining?	
If yes, state type:	Standard First Aid	Advanced First Aid
ir yes, saite type.		
CPR/AED Training	□E.M.T. □EMT	C-CC EMT-P
Other_		
		overed by fire departm ent ins
when responding to or retur	ning from an alarm?	☐Yes ☐No
Do you agree to attend fire	sc hool and receive Firef	fighter I, II training certificate
your probationary period?		□Yes □No
D		1 4 131 1 11 4 61
, ,	artm ent, company and an	l other drills ordered by the Ch
any Officer?		☐Yes ☐No
Briefly describe why you w	rish to becom e a volunte	eer member of the Wake Fores
Department		

11. DECLARAT	ΓΙΟΝ			
I,			_, do hereby depose and	say that I am
the above na	amed person a	and that I have com	pleted the foregoing que	stionnaire and
that I under	stand the cont	tents. I further st ato	e that the answers contain	ned herein are
complete and	d correct in ev	ery respect.		
I also under	stand that any	m aterial misrep	resentation of facts m ay	be cause for
rejection bef	ore appointme	ent or disqualification	on after appointment.	
	7.	0.4 1		
	Signature	of Applicant	Date	
12. PARENTAI	CONSENT			
		_	th (18) birthday s, please	have parent or
iegai guaiuia	in complete th	e following.		
I,			_, hereby give m y pern	nission for my
son/daughter	ſ,		, to join and be a	an active
			I have read and understan	nd the contents
of this applic	cation complet	tely.		
			· · · · · · · · · · · · · · · · · · ·	

Investigation Committee Report:		
Investigating Member:	Date:	
Board of Director's Report:		
Board Member:	Date:	