



# Toney Volunteer Fire Department Member Application

The position(s) you are applying for: (check)

Support Staff

Firefighter

Emergency Medical Services

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Work Phone

\_\_\_\_\_  
Cell Phone

1. Are you legally authorized to work in the U.S.?     YES     NO
2. Are you 18 years of age:     YES     NO
3. Do you have any physical or health limitations that could interfere with your performance in the job for which you are volunteering?  
 YES     NO    (Note: Assignment is contingent on applicant meeting minimum physical/mental demands of the position).

If you answered yes, please explain:

4. Do you have any commitments or responsibilities that might prevent you from meeting job requirements?     YES     NO

If you answered yes, please explain:

5. Do you have any relatives on the Fire Department?     YES     NO    If yes, who? \_\_\_\_\_
6. Have you previously applied for this position?     YES     NO    If yes, when did you apply? \_\_\_\_\_

### Education and Training

1. High School: \_\_\_\_\_ Did you graduate?     YES     NO
2. College/Trade School: \_\_\_\_\_ Subject Major: \_\_\_\_\_  
Did you earn your degree?     YES     NO

3. Please list any skills which you feel relate to this position:

4. Have you received Firefighter/E.M.S. training in the past?  YES     NO

Type of Firefighter/E.M.S. training: \_\_\_\_\_ Date: \_\_\_\_\_

5. Have you received first aid training in the past?     YES     NO

Type of first aid training: \_\_\_\_\_ Date last certified: \_\_\_\_\_

5. Have you received CPR training in the past?     YES     NO

Type of CPR training: \_\_\_\_\_ Date last certified: \_\_\_\_\_

## Driving Record Check

1. Do you agree to a driver's license record check?  YES  NO

a. Driver's license number: \_\_\_\_\_ State of issuance: \_\_\_\_\_

b. Do you have truck driving experience?  YES  NO Type of vehicle: \_\_\_\_\_

c. Driver's license class-A, B, C: \_\_\_\_\_

d. Endorsements: \_\_\_\_\_

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## Criminal Background Check

1. Do you agree to a criminal background check?  YES  NO Social Security #: \_\_\_\_\_

Comments: \_\_\_\_\_

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## Availability and Employment History

1. What hours are you available to respond to emergency calls? \_\_\_\_\_

2. Can you be available for the following meetings and training sessions?

First Tuesday of the month, 7:00 - 9:00 p.m. (active and reserve)  YES  NO

Second-Fourth Tuesdays of the month, 7:00 - 9:00 p.m. (active members)  YES  NO

3. Are you current in your fire certification?  YES  NO If so? Date: \_\_\_\_\_

4. Are you current in your EMT certification?  YES  NO If so? Date: \_\_\_\_\_

5. Can you attend a First Responder or EMT course?  YES  NO

6. Present Employer: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Date Employed: \_\_\_\_\_

Total Years Employed: \_\_\_\_\_ Working hours: \_\_\_\_\_

Specific Duties: \_\_\_\_\_

Does business take you out of town?  YES  NO If yes, please explain normally what hours are you out of town?

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7. Please list your Military Service if applicable:

Branch of Service: \_\_\_\_\_

Reserve Status: \_\_\_\_\_

Attendance requirements if in the Reserve or Guard: \_\_\_\_\_

8. Any mechanical, electrical or other specialized work experience?  YES  NO

If so, please explain: \_\_\_\_\_

9. References-please list three references that are not related to you.

1. Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

3. Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

## Toney Volunteer Fire Department Acknowledged Requirements

I acknowledge and understand that application to become a firefighter with the Toney Volunteer Fire Department requires the following commitment:

Selected applicants will be subject to a 12-month probationary period with review after six (6) months. The following must be completed or accomplished during the 12-month probationary period:

1. Attend monthly meetings (First Tuesday of each month)-Monthly Scheduled Trainings with the Fire Department.
2. Attend functions of Fire Department.

There will be additional training required after becoming an active member of the Fire Department. Firefighters will be required to:

1. Attend training as prescribed in the Fire Department Bylaws and Standard Operating Procedures.
2. Being a firefighter is an emotionally challenging job and provides you with self-respect and self-satisfaction. Firefighting requires training and demands team effort and respect from each individual firefighter in the Department.

**I have read these requirements and agree to them.**

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

**PRINT**

**SUBMIT**

Email applications to:  
applications@toneyfire.com