

NYS law forbids anyone convicted of arson from becoming a member and also states that we check sex offender status, therefore we will be doing a criminal back ground check.

W. K. MANSFIELD HOSE COMPANY
West Crescent Fire District

Application For Membership

Date: _____

Name: _____

Alias or Maiden Name: _____

Street: _____ City: _____

How long have you resided at the above address: _____

How long have you resided in New York State _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Date of Birth: _____

Email Address: _____ Height: ___ft . ___in.

Place of Birth: _____

Social Security Number _____

Are You Currently Employed: ___Yes ___No

If yes, provide employer information below. May we contact your employer as a reference? ___Yes ___No

Employer: _____ Contact Phone: _____

Supervisor: _____

Do you have a valid New York State Drivers License? ___Yes ___No

NYS Client ID number: _____

Do you have past experience in the emergency medical services (Fire or EMS)? If yes, please describe:

Agency: _____ No of Years: _____

Supervisor Chief: _____ Highest Rank: _____

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Current Physical Condition: _____

Restrictions: _____

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West Crescent Fire District**

Application For Membership

REFERENCES:

Please list three people, other than members of this organization and family who have known you for at least three years:

1. **Name:** _____
Phone: _____
Address: _____
Email address: _____

2. **Name:** _____
Phone: _____
Address: _____
Email address: _____

3. **Name:** _____
Phone: _____
Address: _____
Email address: _____

Please list the names of any acquaintances that are members of this organization: _____

Have you ever been a member of the armed forces: ___Yes ___No

If yes, did you receive a dishonorable discharge?** ___Yes ___No

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Have you ever been convicted or pled guilty to a felony and/or misdemeanor, insurance fraud, arson or a reduction of one of those offenses? * Yes No

* Supporting documentation may be required at time of interview
** Dishonorable discharge is not an absolute bar to membership; this and other factors will effect a final membership decision

OSHA regulations require that you pass a physical examination before becoming an active member of this department. The department will provide this examination at no charge to you, which will include a drug test. Will you be willing to undergo such an examination? Yes No

Within the Freedom on Information Law, all information contained/or obtained herein will be confidential and will be used only for internal membership processing.

In order to confirm the information I supplied on my membership to the W. K. MANSFIELD HOSE COMPANY, I authorize all licensing agencies, educational institutions, law enforcement agencies, present and former employers, and the military to disclose relevant records about me, whether this information be public, private or confidential in nature, and release them from any liability and responsibility from doing so.

This authorization in original copy form shall be valid for this and any future information reports or updates that may be requested.

I understand this form will accompany request for official documents and confirmation of my credentials:

Signature: _____ Date: _____

Witnessed by: _____ Date: _____

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The following is a list of items that needs to be completed before you can be brought to the membership for a vote:

- 1. Pass a District approved Physical and Drug Test**
- 2. Completed Arson Background Check and any other investigations that are necessary (completed by District Secretary)**
- 3. Meet with Investigating Committee and PMELT Committee**

Of my own free will, I wish to become a member of the W. K. MANSFIELD HOSE COMPANY and the West Crescent Fire District. To the best of my knowledge the information I have provided is true and that any false statements made on my behalf will be cause for rejection of my application.

Signature: _____ **Date:** _____

Witnessed by: _____ **Date:** _____

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For Office Use:

Please complete date and time of the notification for the following with regards to new applicants:

1. **President of W.K. Mansfield notified of application:**
By: _____ Date of notification: _____
2. **Physical Date Scheduled:** _____ **Secretary Notified of date and time:** _____
3. **Follow Up for Reading for TB Test:** _____
4. **Candidate has sat through PMELT and Fire Services:**

5. **Interview Date and Time:** _____
6. **Reference Checks Completed by whom and when:**

7. **Time to meet for Turn Out Gear:** _____
8. **Set up on Iamresponding:** _____
9. **PMELT Completed and Pager Issued:** _____

