

PLAINFIELD FIRE CO. #1 INC.
620 NORWICH ROAD, PLAINFIELD, CT 06374
 860-564-5541

MEMBERSHIP APPLICATION

In accordance with federal, state and local laws, Plainfield Fire Co. #1 Inc., does not discriminate on the basis of age, race, religion, color, sex, national origin, physical or mental handicap or disability, creed, sexual orientation, ancestry, marital status, veteran status, military status, or any other characteristic protected by law. Plainfield Fire Co. #1 Inc. takes affirmative action with qualified personnel, and is an equal opportunity employer.

****PLEASE PRINT, AND FILL OUT APPLICATION IN BLACK INK****

(Last Name)	(First Name)	(Middle Name)	(Position Applying For)
(Present Address)	(City)	(State)	(Zip Code)
Phone Number:		Email address:	
Cell/Pager Number:		Today's Date: / /	
Age:	Date of birth:		

Mailing address if different:

**In case of Emergency,
Person to notify;**

Name:

Phone#:

Relationship:

Do you have any fear of heights? Yes No (Check One)

Do you have any limitations we should know about? Yes No (Check One)

BACKGROUND INFORMATION (Circle One)

Are you able to legally work in the United States? YES NO

Have you ever been discharged from another emergency service agency? If Yes, explain. YES NO

Have you ever been convicted of, or do you currently have, a charge pending for a felony, misdemeanor, or any other criminal offenses including traffic violations? If Yes, explain. YES NO

MILITARY SERVICE

Branch:	Dates: From; / To / Mo. Yr. Mo. Yr.	Final Rank:
List work performed and training received while in military:		
List additional training/skills received:		

WORK HISTORY

List all past periods of employment, listing the most recent first.

Dates of Employment	Name of Company, Address & Immediate Supervisor	Type of Business	Job Title & Type of Work Performed	Reason for Leaving
From:				
To:				
From:				
To:				
From:				
To:				

**EMERGENCY SERVICE WORK EXPERIENCE
(IF APPLICABLE)**

Course	Date	Location of Training or Service Agency Name
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(PLEASE SUBMIT COPIES OF CERTIFICATES WITH APPLICATION)

EDUCATION

School	Name & Location of School	Year Completed	Graduated?	Major/Field of Study
High School				
College				
Post Graduate				
Other				

REFERENCES

Please include three (3) references. (Do not use immediate family.)

Name	Address	Phone #	Title	Years Known

May we contact your employer(s) and all provided references? (If No, please explain.)
YES NO (Circle One) _____ (Please initial)

WORKERS COMPENSATION (Circle One)

Are you now involved in a workers compensation case? YES NO (If Yes, explain and include injuries.)

Have you ever been involved in a workers compensation case? YES NO

If YES, please explain the type of injury(s), and if you have been cleared to return to work at full duty or restricted.

The following information is requested by the Federal Government in order to monitor our compliance with various civil rights laws. You are not required to furnish this information, but are encouraged to do so. The law requires that we may not discriminate based upon this information, nor whether you choose to furnish it. However, if you do choose not to provide this information, under Federal regulations we are required to note your race and sex on the basis of visual observation or surname. Check the box below if you choose to withhold this information.

I do not wish to furnish this information, (please check box)

ETHNICITY

Hispanic or Latino _____

Not Hispanic or Latino _____

RACE / NATIONAL ORIGIN

Asian _____

Black / African American _____

Hawaiian / Pacific Islander _____

White _____

SEX

Male _____

Female _____

A police background check and physical examination will be involved in the application process. Any and all information contained in this application is strictly intended for use only by Plainfield Fire Co. #1 Inc.

Plainfield Fire Co. #1 Inc. is an equal opportunity provider and employer. Complaints of discrimination should be sent to:

Equal Employment Opportunity Commission (EEOC), 1801 L Street, N.W., Washington, D.C. 20507

APPLICANT

I attest that the information contained within this document is true to the best of my knowledge. If any of the information I provided is found to be false, and knowingly falsified it, this application may be disregarded and the application process will be terminated.

Signature: _____ Date: _____

OFFICE USE ONLY

ACTION TAKEN	DATE	PERSONNEL COMMITTEE
INTERVIEWED:		
PRESENTED FOR 30 DAY POSTING:		
REFERENCES & EMPLOYMENT CHECKS:		
POLICE BACKGROUND & FINGERPRINT CHECKS:		
PRESENTED TO COMPANY FOR 6 MONTH PROBATION:		
PRESENTED TO COMPANY FOR FULL MEMBERSHIP VOTE: <u>ACCEPTED</u> <u>REJECTED</u>		
PRESENTED TO COMPANY FOR DISCHARGE: <u>ACCEPTED</u> <u>REJECTED</u>		
PRESENTED TO COMPANY FOR LIFE MEMBERSHIP: <u>ACCEPTED</u> <u>REJECTED</u>		

OFFICE USE ONLY

Application: Accepted Rejected (circle one)

(If Rejected) Reason:

Applicants status with Plainfield Fire Co. #1 Inc., (Circle one)

Accepted Declined (If declined, reason.)

Personnel Committee

Members:

Chief's Signature: _____ **Date:** _____

If applicant is accepted into service, official date of hire: **Date:** _____

Other notes: