

MEMBERSHIP APPLICATION

**APALACHIN FIRE DEPARTMENT, 230 PENNSYLVANIA AVENUE, APALACHIN, NY 13732
PHONE 625-2216**

Name _____ Date _____

Address _____

Home Phone _____ Work Phone _____ Cell Phone _____

AFD By-Laws restrict membership to those 16 years or age & older. Are you at least 16? _____

If you have lived at the above address for less than 5 years, what was your previous address?

How long have you resided in New York State? _____

Youth ages 16 and 17 are required to provide parental or legal guardian permission and an Apalachin Fire Department sponsor with this application.

I hereby grant permission to the above named applicant to join the Apalachin Fire Department as an Apprentice firefighter (youth between the ages of 16 and 17 years old).

Signature of parent or legal guardian: _____

I hereby sponsor this applicant to the Apalachin Fire Department

Signature of AFD member: _____

Are you currently employed? _____

If "yes", give organization information below. May we contact your organization as a reference? _____

Name of Company _____

Address _____ Telephone _____

Do you have a valid New York driver's license? _____ Driver's License # _____

Please indicate your availability to participate in normally required fire department activities (meetings, drills and emergency calls).

Please check appropriate time periods:

Weekdays: Days _____ Evenings _____ Nights _____

Weekends: Days _____ Evenings _____ Nights _____

Previous emergency services experience or education _____
Name of Agency _____
Address _____
Contact Person _____ Telephone # _____

If more space is needed, use the back of this sheet

Do you know of any health related problems that may restrict or eliminate you from being an active firefighter/EMS member? _____ If yes, list on back of this sheet.

Have you ever been a member of the Armed Forces? _____

If "yes", did you receive a dishonorable discharge? _____

Dishonorable discharge is not an absolute bar to membership. This and other factors will effect a final membership decision. If the above answer was yes, give complete details on attached sheet (include service branch and service dates)

List three personal references, other than family members or those living in the same household as you, who have known you for at least three years.

Name _____ Telephone # _____
Address _____

Name _____ Telephone # _____
Address _____

Name _____ Telephone # _____
Address _____

List the names of any acquaintances who are members of The Apalachin Fire Department:

The Apalachin Fire Department requires a free medical evaluation and drug test by our designated physician, as well as an arson background check. Are you willing to undergo these three procedures?

The application and SECURITY SHEET must be completed and signed by the applicant. They will only be available to the Membership Committee and Board of Fire Commissioners for review and will be regarded as confidential.

Applicant's Signature _____

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FIRE DEPARTMENT USE ONLY

Fire Commissioners Approval  
PROBATION

Chief Officers Approval  
ACTIVE

1. \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

3. \_\_\_\_\_

# APALACHIN FIRE DEPARTMENT

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230 PENNSYLVANIA AVENUE, APALACHIN, NY 13732  
PHONE 625-2216

## **MEMBERSHIP APPLICATION INFORMATION SHEET**

We appreciate your interest in the Apalachin Fire Department and look forward to receiving your completed application.

Please answer all questions and return the application to a chief officer at the above address. You will then be contacted after your application has been reviewed and references checked by the Membership Committee. Your application and security sheet are regarded as confidential and only the Membership Committee and Board of Fire Commissioners will review their contents.

AFD By-Laws require youth between the ages of 16 and 17 to have permission from a parent or legal guardian to join the Apalachin Fire Department, as well as a sponsor who is a member of The Apalachin Fire Department. The By-laws also require Apprentices to maintain a scholastic academic standing the same as those participating in sports and extra curricular school activities. Our Standing Operating Guidelines require parents/legal guardians to submit a statement after each school semester indicating whether the apprentice firefighter is maintaining the required academic standing.

Best regards,

The Membership Committee