

SOUTH LYNCHES FIRE DEPARTMENT



MEMBER APPLICATION

NAME _____ OCCUPATION _____

ADDRESS _____

TELEPHONE # _____ BUSINESS # _____

AGE ____ DATE OF BIRTH: MONTH ____ DAY ____ YEAR ____ MARRIED ____ SINGLE ____

DEPENDANTS ____ SPOUSE NAME _____ BENEFICIARY _____

STATION APPLYING FOR: 1 ____ 2 ____ 3 ____ 4 ____ 5 ____ 6 ____

POSITION APPLYING FOR: FIREFIGHTER ____ DRIVER OPERATOR ____ ENGINEER ____

FIRST RESPONDER ____ SUPPORT PERSONNEL ____

FORMAL EDUCATION:

ELEMENTARY _____ ADDRESS _____

HIGH SCHOOL _____ ADDRESS _____

COLLEGE _____ ADDRESS _____

FIRE SERVICE EXPERIENCE _____

ARE YOU A MEMBER OF ANY OTHER CLUB OR ORGANIZATION? YES ____ NO ____

IF SO, EXPLAIN _____

DRIVER'S LICENSE # _____ SOCIAL SECURITY # _____ - _____ - _____

DO YOU HAVE ANY DRIVING VIOLATIONS WITHIN THE PAST THREE YEARS? YES ____ NO ____

IF SO, EXPLAIN _____

PHYSICAL AILMENTS OR DISABILITIES _____

ARE YOU WILLING TO TAKE A PHYSICAL EXAMINATION IF REQUIRED? YES ____ NO ____

DO YOU REALIZE THAT AS A MEMBER YOU WILL BE REQUIRED TO GIVE FREELY OF YOUR TIME TO ATTEND FIRES, FIRE DRILL MEETINGS AND WORK ON COMMITTEES? _____

HAVE YOU EVER BEEN ARRESTED, SUMMONED INTO COURT AS A DEFENDANT, INDICTED, CONVICTED, FINED, IMPRISONED, OR PLACED ON PROBATION? YES ____ NO ____

IF SO, EXPLAIN _____

DO YOU CONSENT FOR SOUTH LYNCHES FIRE DEPARTMENT TO OBTAIN A CRIMINAL BACKGROUND CHECK FROM THE SOUTH CAROLINA LAW ENFORCEMENT DIVISION DEPARTMENT, AS REQUIRED BY STATE LAW? YES _____ NO _____

REFERENCES: (WORK RELATED, NO RELATIVES)

NAME _____ ADDRESS _____ PHONE # _____

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NAME _____ ADDRESS _____ PHONE # _____

LIST A CURRENT FIRE DEPARTMENT ACQUAINTANCE, IF POSSIBLE _____

APPLICANT'S SIGNATURE _____ DATE _____

FOR OFFICE USE ONLY

MEMBERSHIP COMMITTEE APPROVAL _____ DATE _____

DISTRICT CHIEF APPROVAL _____ DATE _____

FIRE CHIEF APPROVAL _____ DATE _____

DISTRICT OFFICE _____ DATE _____