

50 Sassafras Lane
P.O. Box 789
Ruckersville, VA 22968
(434) 985-7383
(434)990-4236 (FAX)

<http://www.ruckersvillefire.org>

Membership Application

Name: _____

Address: _____

Daytime Phone: (____) ____ - ____ Evening Phone: (____) ____ - ____

Mobile Phone (____) ____ - ____

E-mail: _____

Preferred Contact: Daytime Phone Evening Phone Mobile E-mail Mail

Date of Birth: ____/____/____ SSN(required for background check): ____ - ____ - ____

Do you have a valid Virginia Driver's License? Yes No License from other state

License # _____ Expiration Date: ____/____/____

Specify any endorsements (CDL, etc.) _____

Please attach a copy of your driving record to the application.

Do you consent to the release and review of your Driver's Transcript or Record now and on a periodic basis during service for repeated or significant traffic violations?

Yes No

Membership Applied for: Firefighter (Active Member)

EMT Only (Active Member)

Junior FF (15-17 years; dependents of active members may apply at 13)

Associate

Emergency Contact Information

Name: _____

Relation: _____

Address: _____

Daytime Phone: () -

Evening Phone: () -

Mobile Phone () -

E-mail: _____

Medical History

Do you have any physical, mental, or medical disabilities that could impair your ability to perform certain duties?

Yes No

If yes, please explain: _____

Please list any allergies you may have: _____

Please list any medications you are currently taking: _____

Criminal History

Have you ever been convicted or currently have pending charges of a crime? Please include moving violation traffic offenses, misdemeanors, and/or felonies. *Affirmative answers do not necessarily disqualify the applicant from consideration for membership.*

Yes No

If yes, explain in detail: _____

Do you consent to a criminal background check from local, state, and national authorities?

Yes No

Educational Background

High School

School Attended: _____

Diploma/GED? Yes No

City/State: _____

Last Grade Completed: 9 10 11 12

College/Vocational School

School(s) Attended: _____

Degree Earned: _____

City/State: _____

Years Completed: 1 2 3 4 5+

Employment

Current Employer: _____
Supervisor's Name: _____
Address: _____
Phone: (____) ____ - _____

References

List three references that have known you for at least two years. Do not include relatives.

Name: _____ Relation: _____

Address: _____

Daytime Phone: (____) ____ - _____ Evening Phone: (____) ____ - _____

Mobile Phone (____) ____ - _____

E-mail: _____

Name: _____ Relation: _____

Address: _____

Daytime Phone: (____) ____ - _____ Evening Phone: (____) ____ - _____

Mobile Phone (____) ____ - _____

E-mail: _____

Name: _____ Relation: _____

Address: _____

Daytime Phone: (____) ____ - _____ Evening Phone: (____) ____ - _____

Mobile Phone (____) ____ - _____

E-mail: _____

Firefighter (active member) and Junior Firefighter Applicants, please complete the following pages.

Qualifications, Skills, & Trainings

List any fire, rescue, EMS, and/or emergency management training experience, certifications, and/or licenses you currently hold. Include expiration dates and certifying state, department, or agency. Please attach copies of your certifications to this application.

Certification	Certifying Agency	Expiration Date
		/ /
		/ /
		/ /
		/ /
		/ /
		/ /

List any special qualifications and/or skills you have. Include armed forces training, skills with machines, memberships in professional, scientific, or academic societies, work training programs, public speaking experience, and trade school backgrounds.

Service Orientation

Are you presently, or have you ever been, a member of any fire, rescue, EMS, or emergency services agency?

Yes No

If yes, what agency? _____

May we contact your superior officer/supervisor regarding you service?

Yes No

Supervisor Name: _____ Title: _____

Address: _____

Phone: () - _____ E-mail: _____

Are you a member of any other community service organization?

Yes No

If yes, what organization? _____

Have you ever been denied membership, had disciplinary action taken against you, or been asked to resign by any organization or emergency services agency?

Yes No

If yes, explain in detail. Be sure to include the name and address of the organization.

Military Service

Are you presently, or have you ever, served in a branch of the U.S. Armed Forces?

Yes No

Which branch? _____

Type of Discharge: _____

Date of separation: ___/___/___

Please indicate the time that you would be available to respond to fire/rescue calls (Check all that apply.)

6 am-Noon

Noon-6 pm

6 pm-Midnight

Midnight- 6 am

Weekends

Other

Would you be available Monday evenings starting at 7 p.m/ to attend meetings?

Yes No

Duties

The following is an explanation of duties and expectations of firefighters.

- Attend scheduled meetings.
 - 1st Monday: Work Night
 - 2nd Monday: Monthly Training
 - 3rd Monday: Board Meeting (Only board members are required to attend)
 - 4th Monday: Business Meeting
- Regular attendance to training, fundraising events, work details, and emergency calls is expected.
- Members are expected to pursue training opportunities and obtain firefighting certifications so they may gradually expand their knowledge and role within the fire service.
- As a firefighter at the Ruckersville Fire Company you are expected to follow all Standard Operating Guidelines and follow the direction of company officers.

- All RVFC members are expected to demonstrate the highest level of personal integrity and professionalism. Specifically when wearing RVFC clothing, a neat appearance should be maintained and the purchase of alcoholic beverages is prohibited.

Associate Applicants, please complete the following page.

What skills, training, and/or experience do you have that may contribute to the RVFC? Please list any relevant experience (cooking, management, fundraising, administrative, accounting, volunteer, etc.).

Will you be available to provide disaster relief (water, hot beverages, food, etc.) during large emergencies, such as structure fires?

Yes No

Will you be available to regularly assist with planning and preparation for fundraising events throughout the year?

Yes No

Will you be available to assist with 1 or more fundraising events throughout the year?

Yes No

Expectations

The following is a list of expectations of associate members.

- As an associate member, you will be expected to assist RVFC by providing relief services.
- Assist firefighting members with non-firefighting duties.
- Plan, prepare for, and participate in fundraising events.
- All RVFC members are expected to demonstrate the highest level of personal integrity and professionalism. Specifically when wearing RVFC clothing, a neat appearance should be maintained and the purchase of alcoholic beverages is prohibited.

Applicant Statement

I hereby certify that the facts set forth in the Membership Application are true and complete to the best of my knowledge and that I have not omitted any information. I further certify that there are no willful misrepresentations, omissions and/or falsifications in this application. I understand that providing any false or misleading information may disqualify me from service and from service in the future.

Ruckersville Volunteer Fire Company and/or any duly appointed representative thereof is hereby authorized to make investigation of my personal, employment, criminal, and driving history. I consent to the release of information concerning my capacity and fitness by employers, educational institutions, law enforcement agencies, and other individuals and agencies duly accredited.

_____/____/____
Signature Date

Printed Name

If you are applying as a Junior FF, the signature of a parent or guardian is required.

_____/____/____
Signature Date

Printed Name/Relationship

Phone: (____) ____ - _____

Please print this page, sign, and submit this signed page.

ADMINISTRATIVE USE ONLY

Called/Emailed on: ___/___/___

References Called: ___/___/___

Date Applicant met with Board of Directors: ___/___/___

Approved

Rejected

Date Passed to the Membership: ___/___/___

Date Voted on by the Membership body: ___/___/___

Approved

Rejected

Probationary period starts: ___/___/___ Ends: ___/___/___

Membership Approved: ___/___/___

Back Ground Check Completed Date: ___/___/___ #:

Drug Test completed: ___/___/___

Driving Record received: ___/___/___

Application Process

The following is an explanation of the application process.

1. Fill out an application and submit a copy of your driving record. Background check and driving record will be pulled.
2. You will meet with the board. Please bring a copy of the application and completed signature page to this meeting.
3. Board will approve or deny the application.
4. If approved, you will then meet with the RVFC members at a business meeting.
5. The application is tabled for 30 days, during which time, the members will review and consider the application.
6. The members will then vote and the application will be approved or denied by the membership. You will be informed of the results through your preferred contact method.
7. If approved, you will enter the RVFC as a probationary member.
8. After 6 months of probationary membership, you will again meet with the board. At this time, your performance will be evaluated and your permanent membership will be considered.

Please print or save a copy of this application for your records.

