

## Harwinton Westside Volunteer Fire Department 199 Scoville Hill Road, Harwinton, CT 06791 Membership Application

Personal Information											
Last Name First Name							Middle			Gender Male	Female
Current Street Address City							State	Zip Code		Years at current address	
Race American Indian or Alaska Native Asian Bla	awaiian or Other Pacific Islander White Other Race			Ethnicity  Hispanic or Latino Not Hispanic or Latino							
			City				State	Zip Code		Years at previous address	
Date of Birth Social Security Number		rital Status (Married, Si		Home Pl	) -	(	1obile Phone	-	Work Phone	)	-
Driver's License #	Issuing State	License Class	License Restriction	ns	License Endorsements	Email Addr	ress	@			
Have you ever been convicted of a crime?   If yes, describe nature and disposition of the case.   If yes and											
Present Employer	Shift	Shift Supervisor									
Employer Address City		<u>,                                    </u>				State Zip Code			Years at		
				xperier							
Company/Department From		To Reason for leaving			ng	High			nest rank held		
	/		/								
	/	/	/								
	/	/	/	/							
	/	/	/	/							
	/	/	/	/							
					•				•		
Training/Certifications											
Training or certification title	Date Received		Where obtained	Where obtained					•		
			/	/							
			/	/							
			/	/							
			/	/				-			
			/	/							

--- Application continued on reverse side ---



## Harwinton Westside Volunteer Fire Department 199 Scoville Hill Road, Harwinton, CT 06791 Membership Application

Personal References										
Name		Address				Phone				
						(	)	-		
						(	)	-		
						(	)	-		
						(	)	-		
Position applying for:										
statements given by me on thi West Side Fire Department. I t	s application are correct withou Inderstand that membership in	t consequential omissions of a the Harwinton West Side Fire	nent and agree to abide by its by any kind. I understand and agree Department may be contingent and hereby release them from al	that a false statement or on upon satisfactory completion	nission constitutes sufficient c n of a physical examination, c	ause for disr	nissal from t	he Harwinton		
Signature of applicant					Date					
FOR DEPARTMENT USE ONLY										
Membership application received by						Dat	te /	/		
Membership Committee review/interview?  Membership Committee recommendation  Yes No No Yes No								/		
Membership Committee Chair review						Dat	re /	/		
Company vote date	Results Accepted Declined	Comments (i.e. accepted into observe	er status, accepted into full active status, e	tc.)			•	·		
Medical exam completion date	Background check performed?	DMV records checked?	Lieutenant assigned to				Bluelight Per	rmit Issued?		
/ /	☐Yes ☐No	□Yes □No					□Yes	□No		
Comments:										