



ORGANIZED 1915

LINEBORO VOLUNTEER FIRE DEPARTMENT, INC.

P.O. Box 240 • 4224 Main Street • Lineboro, Maryland 21088

Phone: 410-374-2197 / 410-239-4670 • Fax: 410-374-9254

Dear Applicant,

Thank you for your interest in the Lineboro Volunteer Fire Department. Please make sure to read, completely fill in all requested information, and sign and date both applications. If you are under 18 years of age, please be certain to have your parent or guardian sign and date the application as well. All completed applications are to be turned in to the Financial Secretary for processing. Please note that in order for your application to be processed there is a \$5.⁰⁰ application fee and a nonrefundable \$30 background investigation fee. You must be present at the company meeting to submit your application; meetings are held on the first Wednesday of every month at 7:30 PM.

Thank you for your interest in the Lineboro Volunteer Fire Department, we are looking forward to seeing you in the future.

Sincerely,

Lineboro Volunteer Fire Department

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Lineboro Volunteer Fire Department, Inc. Page 2
4224 Main Street
Lineboro, Maryland 21088

Application for Membership

Date Application Submitted		Fee Paid	Yes	No
Date Received by Committee				
Date of Starting Probation		Vote Results		
Date of Active Membership				

Applicant's Name:			
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In an effort to treat the Volunteer Fire Department Membership in a more professional manner, a comprehensive application is being used to reflect the responsibilities that a volunteer in the fire department has, the same as a paid member. Please complete all pages of the application and return signed in appropriate areas on pages 2 & 6. If you are accepted to the Lineboro Fire Department as a member this application will serve as part of your personnel file.

To further emphasize the demands or needs of the Volunteer Fire Department in our community, a list of non-emergency service jobs on the last page of this application for your consideration. Matching your skills and desires to the job that will benefit your community is just as important to the Lineboro Volunteer Fire Department as a firefighter or Emergency Medical Technician.

Meetings are on the first Wednesday of each month at 7:30 PM.

Let it be understood and agreed that any misrepresentation of any information on this application will be sufficient grounds for dismissal of this application or termination from the Lineboro Volunteer Fire Department if I am accepted as a member. I also agree to abide by any rules the Lineboro Volunteer Fire Company sets forth upon my becoming or remaining a member. I agree to allow the Lineboro Volunteer Fire Department to verify my background as a condition to belong to the Lineboro Volunteer Fire Company Inc. Applicants under the age of eighteen must have their parents' or guardians' permission to belong and participate in activities. All applications are the property of the Lineboro Volunteer Fire Department Inc and are not for public review.

Signature

Date

Parent or Guardian Signature

Date

Position Applying for:

Firefighter

EMS:

Other:

Personal Data:

Name:

Last

First

Middle

Nickname:

Marital Status:

Home Address:

Phone Home:

Phone Work:

Email Address:

Driver's License #

State:

Type:

Has your driver's license ever been suspended and/or revoked ?

If yes, explain:

Employment:

Occupation:

SS#:

Employer

Employer Address:

Dates:

Employer Phone:

Previous Employer

Employer Address:

Dates:

Employer Phone:

Previous Employer

Employer Address:

Dates:

Employer Phone:

In Case of Emergency, Please Notify the following:

Name:

Relationship:

Address:

Home Phone:

Work Phone:

Church/Clergy:

Phone:

Doctor's Name:

Phone:

Fire / Rescue Experience::

1. Have you ever applied to this or any other fire department before?
If Yes, please list name and dates below:

a)	Dates:
b)	Dates:
c)	Dates:
d)	Dates:
2. Have you ever served in another fire department? If yes, list name of department, dates served, phone #, and town.

a)	Dates:
b)	Dates:
c)	Dates:
d)	Dates:
3. List types of fire / rescue vehicles you have been authorized to drive. E.g., ambulance, pumper, ladder truck, etc.)
4. State highest rank / office you have held:
5. List all fire science or related courses you have taken. E.g., Basic Fire Fighting, Emergency Medical Tech, etc.

Attach copies of certificates earned

Education:

Name of high school:

Address of high school:

Last grade completed:

College / University:

Credits / Degrees:

Other training, skills, interests or hobbies::

References:			
Read Carefully:		List as character references three people whom you have known for at least three years and who are NOT related to you. May NOT be past employers.	
1.	Name:		Address:
	Phone:		Occupation:
2.	Name:		Address:
	Phone:		Occupation:
3.	Name:		Address:
	Phone:		Occupation:
General Information:			
Have you ever been convicted of a criminal offense as an adult ? If yes, explain; give offense, sentence, state below:			Yes No
Do you use alcohol, smoke, prescription drugs for an ongoing condition ? If yes, explain how much, how often ? Explain below:			Yes No
Have you ever used or tried illegal drugs ? Explain below:			Yes No

Other Comments & Information:

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Wavier and Release:

I authorize the investigation of all statements made herein. I understand that any false statements or omissions of information requested are cause for rejection of my application. My signature on this application indicates that I am aware of the physically challenging demands for the Position of Firefighter or Medical Technician and that my membership may be dependant upon my successful completion of a physical examination.

Signature of Applicant: _____

Date: _____

: _____
Signature of Witness or Parent if under eighteen years of age _____ Date _____

Administrative Review

Fee Photo School Check School

Record Check Finger Print Check Drivers License

Employment Fire / EMS Experience

References Interviewed By Physical Exam

Mentor Assigned Investigator MIEMSS #

Fire Dept ID # Board of Officers Name Posted

Committee Recommendation: Recommended Not Recommended

Comments: _____

Investigation for Membership

Applicant Name: _____

(print name only, remainder of form for LVFD use)

Employment: Correct ? Yes No

Recommended for position ? Yes No

Who you spoke to: _____

Education: If still in school verify behavior and grades.

Who you spoke to: _____

Previous Fire Department:

Verify membership/work history: Yes No

Who you spoke to: _____

Is applicant recommended ? Yes No

Work well with others ? Yes No

Reason for leaving ? _____

Experience level / position _____

Application: Information correct ? _____

Reviewed with applicant ? Yes No

Drivers License: State of record:

Class:

Record of violation: Yes No

Admits record ? Yes No

Record / Criminal: Does applicant admit record ?

If record found, provide details:

Parents / Guardian: Do they recommend and/or are they aware of this application ? Yes No

Personal Background:

Use of intoxicants: None Moderate Excessive

Explain: _____

Use of narcotics; prescription or non-prescription: Yes No

Explain: _____

Committee Recommendation: Recommended Not Recommended

What areas recommended if so? Or summarize.

Help Wanted -- LVFD

Non-Emergency Jobs

- Auxiliary Member
- Building/Equipment Maintenance:
 - Carpenter, Gardener, Mechanic, Plumber, Painter, Supply Officer
- Building Committee
- Counselor/Advisors/Consultant-ADA Consultant, AIDS Advisor, Consultant
- Community Relations Director
- Webmaster
- Coordinators:
 - Fun, Job, Recognition, Tour Guide, Volunteer, Special Events, Youth Program
- Fund Raiser:
 - Bingo Caller, Cook, Kitchen Help, Special Events Planner
- Information Collection/Management:
 - Archivist, Graphic Artist, Historian, Information Director, Journalist, Librarian, Newsletter Editor, Photographer, Video Production
 - Key Control Officer
 - Liaisons -Industrial, Neighbor, Television
- Membership Committee
- Office Help
 - Data Entry Clerk, File Clerk, Document Custodian, Inventory Control, Office Assistant, Receptionist, Word Processor, Writer, Xerox Attendant
- Quality Control Monitor
- Specialists--
 - Bilingual, Computer, Education, Equipment, Legislative Action, Media, Orientation, Records, Safety, Registered Nurse
- Training:
 - Health/First Aid Educator, Instructor, Medical Trainer, Mentor
- Trustee

Emergency Jobs

- Ambulance/Brush/Special Unit Drivers
- Emergency Medical Technician
- Engine/Tanker Drivers (Class B License required)
- Fire Fighter
- Hazardous Material Specialist
- Paramedic