O. L. DAVIS FIRE COMPANY INSTRUCTIONS TO APPLICANT

Please fill out the attached application for membership.

PLEASE NOTE THE FOLLOWING:

- You must be a resident of the Endwell Fire District or, If you live outside of the fire district, you must live within two (2) driving miles from the fire district boundary.
- You must be at least 16 years of age to join (16 & 17 year olds require parental permission).
- You will need to list two references who are not relatives and are over the age of 18 years of age, whom you have known for at least three (3) years.
- You must sign the release form attached to the application and submit with your application so that a background check may be done. New York State requires a background check for arson convictions.

The following process occurs when an application is submitted for membership. The process takes approximately 2 months for completion:

- 1. The application is read before the fire company at the next monthly meeting.
- 2. The application is then submitted to the membership committee. If you are under 18 you will be required to bring a parent or legal guardian to your interview who will have to sign the consent portion of the application at that time. At this meeting you will be advised on the requirements for membership.
- 3. New York State Law now requires an arson conviction criminal history check. Anyone with a conviction for arson may not join any volunteer fire company.
- 4. When you come in for your interview you must bring in your New York State Driver's license and some other form of identification (college or work ID card, birth certificate, etc.) to verify your identity.
- 5. If you have previously belonged to another fire company you must provide a letter of release, signed by the Chief or a company officer of the former fire company.
- 6. Following the interview the membership committee will report back to the fire company. Then the entire fire company in attendance will vote on the application.
- 7. The applicant will be notified via mail of the fire company's decision. If accepted you will be given instructions on when to report.
- 8. A doctor's physical is required for firefighters. Forms and information on this will be sent to you following acceptance. This must be done before you can begin any training.

Any time during the process, should you have any questions, or wish to withdraw your application, contact the fire district office at 785-0985. Office hours are Monday to Friday, 9:30 am to 4 pm or you may leave a message on the answering machine and someone will return your call.

REMOVE THIS INSTRUCTION SHEET AND KEEP FOR YOUR RECORDS!!!**



ENDWELL FIRE DEPARTMENT

3508 Country Club Road Endwell, New York 13760 Business Office (607) 785-0985 Fax (607) 785-6718 E-mail: endwellfire@endwellfire.com

EMERGENCIES 911

CONSENT FOR RELEASE OF INFORMATION

I,	(please print your name), do hereby
authorize the release of any and all inform	nation about myself from any source deemed necessary, to a
representative of the O. L. Davis Fire Compa	any/Endwell Fire Department, prior to me being considered for
membership in the Endwell Fire Departme	nt/ O. L. Davis Fire Company:
This release includes information on all of t	the following:
Criminal History	 Drivers License Abstract
• Education Verification (fire cours	ses only) • Past Fire Company Personnel Records
• References	• Other
 Public Safety Records 	
Only relevant information obtained through	this investigation shall be considered for membership purposes.
_	
	s Fire Company/Endwell Fire Department, prior to me being considered re Department/ O. L. Davis Fire Company: on on all of the following: • Drivers License Abstract on (fire courses only) • Past Fire Company Personnel Records • Other
_	Date
_	
	Date of birth
-	Any other name by which you have been known

O. L. Davis Fire Company

Application for Membership

Name						
Have your previously applied for membership in the O. L. Davis Fire Company? If yes, when?						
Why do you want to join the O. L. Davis Fire Company?						
Duccont Address						
Present Address						
Previous Address (If present address is less than 3 years)						
Telephone number () Cell phone number ()						
E-mail address						
Are you 18 years or older? Yes No If "No" , state your age						
Citizen of the U.S.A.? Yes No						
Do you have a valid NYS Drivers' License? Yes No License #						
Are you currently employed? Yes No						
EMPLOYMENT HISTORY- Beginning with your current or most recent employer, list below present and past employers.						
Name and address From (Month/Year) to Month/Year)						
1)						
2)						
3)						
EDUCATION HISTORY						
Are you a full time student? Yes No						
If 'YES' school currently attending						
If 'NO', highest level completed						

CONVICTIONS AND JUDICIAL PROCEEDINGS:

A.	Crim 1.	Have y (Exclud	nal Have you ever been arrested for, or convicted of any violation of the law, in any jurisdiction? (Exclude traffic or parking offenses but include juvenile delinquency, youthful offenders, or adjudication).					
		NOYES If 'YES' list below						
		Date	Charge	Court	Police Agency	Disposition		
	a)							
	b)							
	c)	*Attacl	a separate sheet if r	necessary				
	2.	List below all traffic offenses and parking violations that you have received:						
		Date	Charge	Court	-			
	a)							
	b)							
	c)	*Attacl	a concrete sheet if r					
	3.	*Attach a separate sheet if necessary Have you received any traffic or parking violations for which you cannot remember the date, charge or location?NoYes						
	4.	Are there now pending against you any proceedings or charges involving any violation of the law, or any fines or penalties, which have not been paid?						
		NoYes If 'Yes' give details:						
GENE	RAL HI	STORY:						
List ar	ny milit	tary exper	rience:					
Have y	you eve	er been a i	member of another f	ire department? Yes	No			
If 'Yes a men	', give on the second of the s	details, inc ou will nec	cluding where, numbed a letter of release.	er of years, offices he	ld, and if you are curre	ntly a member. If currently		

Name:	Address	Phone
Name:	Address	Phone
We have se	IIP CLASSIFICATION: veral different categories of membership as shown be checking that particular category:	low. If you know what you want to do, please
0	Endwell Fire Department issued firefighting tur firefighting duties. Carrying, setting and climbing fires; rolling and loading hose lines on apparatus;	abilities. Common requirements include wearing nout gear; wearing an air pack to perform some ladders; pulling and stretching hose lines to attack carrying hand tools; entering buildings where fire duties at motor vehicle accidents; and other types
0	Endwell Fire department issued firefighting turn pulling and stretching hose lines to attack fires; ro	abilities. Common requirements include wearing nout gear; carrying, setting and climbing ladders; lling and loading hose lines on apparatus; carrying onditions exist; performing duties at motor vehicle
0	requires certain physical and mental abilities. You in the road in traffic. Common requirement incl	ey perform their duties. Belonging to the Fire Police In may be spending a good deal of time standing out ude wearing Endwell Fire Department issued fire where fire and other hazardous conditions exist; I other types of incidents.
NOT	E: YOU MUST BE AN ENDWELL RESIDENT TO APP	LY FOR AUXILIARY OR SUPPORT PERSONNEL.
0	Company but to render any possible assistance to activities through the Endwell Fire Department or of these responsibilities include responding to the	conly promote the welfare of the O. L. Davis Fire to the O. L. Davis Fire Company as it performs its interacts with the public in its other activities. Some e scene of an incident to provide dehydration and and, planning and working at fundraisers and other
0	SUPPORT PERSONNEL (non-incident re The purpose of the Support Personnel is to affo	elated service) rd Endwell residents who may not want to have

anything directly to do with any kind of emergency response but would like the opportunity to volunteer their time for public service a place to do so. If you have a specific skill set that would benefit

the O. L. Davis Fire Company or the Endwell Fire Department, we may have a place for you.

Notice to applicant: Please read the following section carefully before signing.

This application will be investigated by the committee for character references and for any criminal convictions. If found by the investigation that the above references prove negative, or if convicted of a crime, this application may not be accepted by the committee. If accepted by the committee, this application will be presented to and must be accepted by the O. L. Davis Fire Company for membership approval.

I understand that misrepresentation or omission of facts called for will not be interpreted in my favor.

I agree to the service of legal process at my last know address in the Endwell, New York Fire District.

Agreement: I, the undersigned, do swear that the answers to the above questions are true and I understand that any false answer may be cause for my dismissal from the company.

Signature of Applicant:	Date:
This section to be filled out if the applicant is unde Investigating Committee.	er the age of 18 years and is to be signed in the presence of the
Signature of Parent or Guardian	Date:
Schedule date of First Reading	

ARSON BACKGROUND CHECK

NAME: (LAST, FIRS	T, MIDDLE)						
ADDRESS:							
NICKNAME(S)/ALIA	AS AND/OF	R MAIDEN NAM	IE:				
SEX:		RACIAL APPEARANCE:					
☐ MALE ☐ FEMALE		WHITE BLAC	ск і]	NDIAN A	ASIAN	unknown (OTHER
ETHNICITY:	HI	EIGHT			DATE	OF BIRTH	
HISPANIC							
□ NOT HISPANIC			_				
UNKNOWN	Feet	Inches		Month	Day	Year	
PLACE OF BIRTH							
SOCIAL SECURITY	NUMBER						