

**APPLICATION FOR MEMBERSHIP  
IN THE  
VALLEY CITY VOLUNTEER FIRE DEPARTMENT**

Name: \_\_\_\_\_

SSN: \_\_\_\_\_ Emergency Contact Person : \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**PLEASE PRINT OR TYPE**

To Chief, Members of Valley City Volunteer Fire Department:

I, \_\_\_\_\_ do hereby apply for membership in the Valley City Volunteer Fire Department.

My residence for the past 5 years has been as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My education has been as follows:

High School: Where? \_\_\_\_\_ Grad? Y N  
College? Where? \_\_\_\_\_ Grad? Y N

My present occupation is \_\_\_\_\_ Date Started \_\_\_\_\_

My present employer is \_\_\_\_\_

My former occupation was \_\_\_\_\_ For how long? \_\_\_\_\_

Have you ever been a member of a Fire Department, either volunteer or otherwise? Y N

Do you have any Fire Fighter Training (Y N), First Aid (Y N) or CPR Training (Y N)

If so, describe: \_\_\_\_\_

\_\_\_\_\_

Give 3 personal references and phone numbers:

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

If you qualify, are you willing to abide by the Constitution, By-Laws & Directives of the Valley City Volunteer Fire Department? Y N

Are you willing to accept and obey orders of your superiors in the Fire Department? Y N

Are you willing to answer calls regardless of the day or hour? Y N

Do you have a valid ND driver's license? Y N

Is North Dakota your state of residence for all purposes? Y N

Is there anything that would prevent you from performing certain duties of this position (physical or health reasons)?

\_\_\_\_\_  
\_\_\_\_\_

I understand that prior to acceptance or answering any fire call I am to pass the required physical, drug test, and agility test, (Signature Required)\_\_\_\_\_ and I further understand that I must pass the Valley City Firefighter 1 Testing Program within 1 year of entry date, completed eight (8) hours first aid and CPR training.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at Valley City, ND.

\_\_\_\_\_  
Signature of Applicant (Full Name)

\_\_\_\_\_  
Print Name

**STATEMENT OF EMPLOYER**

I, \_\_\_\_\_, Owner-Manager of the \_\_\_\_\_ who employs \_\_\_\_\_, an applicant for Volunteer membership in the Valley City Volunteer Fire Department do hereby state that the application is being made with my full knowledge and that the said applicant is free to leave his employment at the sound of a fire alarm.

\_\_\_\_\_  
Employer Signature

**FOR OFFICE USE ONLY – DO NOT WRITE BELOW**

Received this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

By: \_\_\_\_\_, Chief

Filed with the Secretary this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

PD investigation of applicant \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Favorable \_\_\_\_\_ Referred to question \_\_\_\_\_

Approved by the Executive and Administrative Boards of the Valley City Volunteer Fire Department this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Secretary Signature

OATH \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_

Promotions: \_\_\_\_\_  
\_\_\_\_\_

Misc: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## CLOTHING ISSUE

	SIZE	ISSUED	RETURNED
BUNKER COAT			
BUNKER PANTS			
BOOTS - KNEE			
MISC. GLOVES			
GLOVES			
MITTS			
NOMEX HOOD			

## MISCELLANEOUS ISSUE

PAGER			
CHARGER & SPARE BATTERY			
PAGER COVER			
STATION KEYS			
TRAINING MANUAL			

## NOTES

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I the undersigned do hereby certify that the above indicated items were issued to me. I further understand that the same shall be returned to the Valley City Volunteer Fire Department upon my leaving.

Signature \_\_\_\_\_ Date \_\_\_\_\_