

CENTRE HASTINGS FIRE DEPARTMENT

P. O. Box 900, 7 Furnace Street Madoc Ontario K0K 2K0

Phone: (613) 473-4030



VOLUNTEER APPLICATION FORM

Centre Hastings Fire Department welcomes volunteers of all ethnic backgrounds and varied skills (ages 18 & older for Fire Fighting and Emergency First Responders). Volunteer applicants are evaluated on the merits of their qualifications and are subject to background & drivers license checks . Please mail the completed application to the address listed above or drop off at the municipal office.

NAME:

Last

First

Middle

ADDRESS:

Street

Apartment

City

Province

Postal Code

PHONE:

Home

Work

email address: _____

New Volunteer Y N

Returning Volunteer Y N

Last Served _____

In Case of Emergency Contact:

NAME:

Last

First

Phone

List three personal character references who have known you for at least one year or longer and are

NAME: _____ DAY PHONE: () _____
 HOW ACQUAINTED? _____ HOW LONG KNOWN _____
 NAME: _____ DAY PHONE: () _____
 HOW ACQUAINTED? _____ HOW LONG KNOWN _____
 NAME: _____ DAY PHONE: () _____
 HOW ACQUAINTED? _____ HOW LONG KNOWN _____

List any name, other than your name as it appears on this application that others may know you as.

 SOCIAL INSURANCE # _____
 DRIVERS LICENSE # _____ CLASS _____
 ISSUED BY WHAT PROVINCE? _____ EXPIRES _____

Education : Attach additional pages of Education & Training as needed

High School / Vocational School / College / University

Name of Institution	Year Completed	Level	Major / Specialization

Courses / Certificates / Specialized Skills / Trades

Description	Date

BACKGROUND CHECK

EDUCATION

MILITARY SERVICE	EMPLOYMENT BACKGROUND		VOLUNTEER INTERESTS	
MILITARY SERVICE: _____				

<i>Branch</i>	<i>Years of Service</i>			
<i>Acquired Skills</i>	<i>Last Year of Service</i>			
PRESENT EMPLOYER: _____				

<i>Position</i>	<i>Typical Work Day Hours</i>	<i>Phone</i>		
IF RETIRED OR FORMERLY EMPLOYED:				
List two employment positions which you have held that you enjoyed the most. In the last column, answer Y- yes or N-no if you would like to do something similar as a volunteer,				
<i>Position</i>	<i>Company</i>	<i># of Years</i>	<i>Y/N</i>	
<i>Position</i>	<i>Company</i>	<i># of Years</i>	<i>Y/N</i>	
Preferred Working Environments:				
_____ Alone	_____ Outdoors	_____ With Lots of Freedom		
_____ With Others	_____ Indoors	_____ In a Quiet Setting		
Preferred Programs:				
_____ Children	_____ Adults	_____ Elderly	_____ Animals	
_____ Teenagers	_____ General Public	_____ Other		
Indicate Choices in order(1,2,3,4etc.) I might enjoy an assignment as a (an).....				
_____ Child Care Volunteer	_____ Accountability Officer	_____ Photographer		
_____ Firefighter	_____ Rehab Officer			
_____ Food Services	_____ Safety Officer			
_____ Gardener	_____ Pump Operator/Driver			
How did you hear about Centre Hastings Fire Department Volunteer Service?				
_____ Newspaper	_____ Web Page			
_____ Radio	_____ Brochure/Pamphlet			
_____ Other Volunteers				

What would you like to gain from your volunteer experience?

- Personal Satisfaction _____ Improving the quality of life for someone
- Firefighter Certification _____ Employment Preparation
- Meet School Requirements _____ Help Extend Community Services
- Other _____

VOLUNTEER INTERESTS

If applicable other agencies with whom you have volunteered:

<i>Agency</i>	<i>Province</i>	<i>Position</i>	<i>Dates</i>

Talents / Hobbies

- Carpentry _____ Drawing _____ Cooking _____ Crafts _____
- Photography _____ Gardening _____ Computer _____ Sewing _____
- Farming _____ Acting _____ Singing _____ Dancing _____
- Antiques _____ Instrument _____ History _____ Writing _____
- Pet Care _____ Sports _____ Magic _____ Speaking _____
- Other _____

Office Skills

- Copying/Filing _____ Book keeping _____ Switchboard _____
- Typing _____ Stuff Packets _____ Calculator _____
- Computer Software _____

Languages _____ English _____ French _____ Other _____

Skills I would like to learn: _____

SKILLS

I have read and understand this application and certify that all statements provided on this form are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that misrepresentation of facts shall be considered basis for rejection of my application or discharge if accepted. My signature authorizes my listed references permission to release any information regarding my character, volunteer, or employment experiences.

Signature of Applicant

Date