

150 West Sparks Street Markle, Indiana 46770-0149 Phone: 260-758-3285 Fax: 260-758-2832

Application for Membership

Thank you for your consideration in applying to the Markle Volunteer Fire Department. To apply, please complete and submit this official application form. The application shall be completed in full. We may wish to contact you by mail, telephone, and/or email. It is your responsibility to make sure contact information is correct and current. Except to accommodate the needs of individuals with disabilities, executive committee members cannot complete or change any information on the application. Any changes must be made by the applicant in person or through signed written communication.

Personal Information

Name:			
Address:			
City:	State:	Zip Code:	
Phone Number:			
Email:			
Date of Birth:			
Are you at Least 18 Year	s of Age: □Yes	□No	
Driver's License Number	1:		
Position Applying For:			
FIRE FIRST RESPO	NDER BO	ОТН	

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

If Yes, Please Provide Details and Dates:

Have you ever been convicted of, or have you ever pled guilty or no contender (no contest) to, a crime other than a minor traffic citation in court? □Yes □No If yes, please provide details, where, and what was the outcome?

In a few sentences please list why you want to be a part of Markle Volunteer Fire Department:

Emergency Contact Information

Name:	Relation	ship:	
Address:			
City:		Zip:	
Home Phone:			
Cell Phone:			

Education	
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Highest Level of School Completed: _	
High School Attended:	
Diploma Received? 🗆 Yes 🗆 No	
College Attended:	
Field of Study:	
Degree Earned:	
Emp	oloyment
Current Employer:	
Dates Employed: to	<i>.</i>
Address:	City
State: Zip Code:	
Contact Person:	Phone Number:
Previous Employer:	
Dates Employed: to	
Address:	City
State: Zip Code:	
Contact Person:	Phone Number:
Previous Employer:	
Dates Employed: to	·
Address:	City
State: Zip Code:	
Contact Person:	Phone Number:

Fire & Rescue Experience

Have you ever applied to Markle Volunteer Fire Department? □Yes □ No If Yes, List Dates: _____

Have you ever been apart of another Fire Department or EMS? □Yes □ No If Yes, Please list Name/Dates/Contact Info:

References

Please list three character references that you have known for at least three years. References cannot be employers and cannot be related to you. Please provide all information asked for and print clearly and neatly. **The executive committee will contact all references and the committee will need to receive a response from the reference before scheduling the applicant for an interview.**

Name:	Years Known:	
Address:		
City:	State:	Zip Code:
Phone Number:	Email:	
Name:		Years Known:
Address:		
City:	State:	Zip Code:
Phone Number:		Email:
Name:		Years Known:
Address:		
City:	State:	Zip Code:
Phone Number:		Email:

Important Facts to Consider

Time commitment. Volunteering with MVFD or any other station in the county requires a very significant time commitment on the applicant's part. Members are required to attend at least one Fire training each month and are encouraged to attend a monthly business meeting, and will frequently be asked to help out with community events. Applicants for First Responder must obtain First Responder Certification within their first year. Fire Only Members must obtain a minimum of mandatory certification within their first year. If applying for both, applicate must obtain First Responder and Mandatory Fire certifications within the first year. Time frame exceptions are made if no classes are offered. Meeting such time requirements needs a significant commitment on the part of the applicant and their family/significant others. We strongly encourage that the applicant think about the time commitment in terms of their families and/or significant other to ensure that they have their support and understanding.

It is not a glamorous job. Participation with the Fire/Rescue services is not necessarily for everyone. Depiction of the service on television series such as Chicago Fire, Third Watch, ER, etc..., though often based on real life situations, are not an accurate portrayal of what one necessarily does or observes in the Fire/Rescue Service. The work is physically strenuous, emotionally challenging, and high stress. Service providers have to deal with extremely noisy, dirty, work environments and are exposed to unsightly, disturbing sights on a regular basis. The rewarding aspects of the service is the knowledge of a job well done, having the ability to help someone in need, and often having made a difference in someone's life. It is often a thankless job with few tangible rewards, a lot of training and little recognition. You need to ask yourself if "this is for you?"

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Certification and Authorization

I hereby certify that the statements contained herein are true and correct to the best of my knowledge. I understand that should the investigation disclose material misrepresentation, omissions, and/or falsifications, my application may be rejected, or if a member, my membership and all rights and privileges of my membership may be terminated. My signature on this application indicates I have read the job description for the position which I am applying for and I understand that the job of a Firefighter/Rescuer and First Responder is physically challenging and that my membership is dependent upon successful completion of a physical examination to be conducted by the Training Officer of Markle Volunteer Fire Department.

This is to certify that I,______(Full name) am an applicant for a Firefighter and First Responder member position with the Markle Volunteer Fire Department and that I do hereby authorize the release of any and all information to the Markle Volunteer Fire Department that they may request, from any of my records or files. Such information may include, but will not be limited to: military records, volunteer records, employment records, education records, criminal records, and transcripts, etc. I also release all persons from any and all liability, which could result from furnishing said information to the Markle Volunteer Fire Department.

Further, I authorize the Markle Volunteer Fire Department to copy or otherwise reproduce this original document and let such copied or otherwise reproduced copy act as the original document. The original document is to be retained on file with the Markle Volunteer Fire Department and this authorization to release information shall expire from one (1) year of the date signed by me.

Further, I authorize the investigation of all statements contained herein, and direct the custodian of any of the records relevant to the confirmation of these to release such information necessary for verification. I further understand that the information obtained by the Markle Volunteer Fire Department during the application process will not be revealed to me should my application be rejected.

I have read, or have had read to me the statements above and my signature below agrees to these statements above.

Signature of Applicant:	Date:
5 II <u> </u>	

Print Name: _____