

Dear Applicant:

Thank you for considering becoming a member of the Blasdell Volunteer Fire Department. Following the application process and acceptance to the department, you will join a group of dedicated individuals with varying interests, who share in the belief in serving their community by being volunteer firefighters. Volunteer firefighter does not mean amateur firefighters; rather we are professionals who are not compensated for our efforts.

You will find that we are well trained through courses offered in Firefighting and Emergency Medical Services by the New York State and Erie County Offices of Fire Prevention and Control and the Department of Health. Many of the courses are college accredited, which aid many of our members towards their degree goals. We provide basic and intermediate care to our residents, visitors and to the surrounding areas through the operation of our own ambulance.

The experiences you will encounter will help you grow in ways you may not have realized you could, as well as give you a sense of reward that no other volunteer job could offer.

We wish you the very best in your endeavor of becoming a volunteer firefighter.

Very truly yours,

Your Brother and Sister Firefighters

BLASDELL VOLUNTEER FIRE DEPARTMENT
APPLICATION FOR MEMBERSHIP

Date: _____

1. _____
(Last Name) (First Name) (MI)

2. _____
(Street Address) (Apt/Suite Number)

(City, Town, Village) (State) (Zip Code)

3. Telephone: (____) _____ (____) _____

4. How long have you resided at the above address? Years: _____ Months: _____

5. How long have you resided in New York State? Years: _____ Months: _____

6. Are you 18 years of age or older? Yes ___ No ___ Date of Birth: _____

7. Social Security Number: _____ - _____ - _____

8. Please list additional information about a change in your name or use of an assumed name or nickname to enable a check on your eligibility for membership?

9. Are you currently employed? Yes _____ No _____

Name of Employer _____

Address _____

_____ Telephone (____) _____

May we contact your employer as a reference? Yes _____ No _____

10. Do you have a valid New York State Drivers License? Yes ___ No ___ If yes please attach a copy of your license

11. Previous emergency service experience:

Name of Agency: _____

Address: _____

Contact Person: _____ Telephone (____) _____

(If additional space is required, please use an additional street)

If previous service has occurred a letter must be attached from the Chief of that Department stating that you left as a member in good standing.

12. Have you ever been a member of the United States Armed Forces? Yes _____ No _____
If yes, for what branch did you serve and during what dates? _____

- Did you receive a dishonorable discharge? Yes _____ No _____ (If yes please explain on a separate sheet)
13. Have you ever been convicted or plead guilty to a felony, misdemeanor, insurance fraud, arson or a reduction of one of these offenses? Yes _____ No _____ (If yes please explain on a separate sheet).
14. Please attach three personal reference letters. The letters cannot come from a relative or spouse and cannot come from a member of this organization.
15. Please list the full proper names of any friends that are members of the Blasdell Volunteer Fire Department: _____

16. You will be required to pass a physical examination before joining our organization; will you be willing to undergo a medical examination? Yes _____ No _____

In order for an application to be considered all questions must be answered and three letters of reference must be provided. Incomplete applications will not be considered.