



PLEASE READ THE INFORMATION BELOW BEFORE FILLING OUT THIS APPLICATION

1. All applications should include the following:

A. A copy of the applicant's social security card and driver's license.

2. Before an individual will be considered for an interview, his/her application must include the following:

A. Criminal and driving history as requested on the application. Note: This information has **no date boundary**.

B. The applicant **must** supply **all** information regarding his/her history, **including**, but not limited to, **traffic tickets**.

C. All Volunteer Memberships are contingent on the results a Physical Examination, Criminal, and Driver License background investigations.

D. Signature of applicant.

E. Please note: If any of the information listed in Item No. 2 is missing, the applicant will not be considered.

SIGNATURE _____ DATE _____



APPLICATION FOR MEMBERSHIP WITH VOLUNTEER UNIT

Land O' Lakes __ Magnolia Valley__ San Antonio __ South Central__ Tampa Bay Golf __
Travelers Rest__ Tri-Comm. __ West Pasco__

Instructions: This application must be filled out completely and accurately. All statements are subject to investigation. Exaggerated, false, or misleading statements are cause for rejection or termination.

PLEASE TYPE or PRINT CLEARLY

Name _____
FIRST MIDDLE LAST

If your name has changed, indicate the name under which the County may verify information

Supplied on this Application _____

Present Address _____
STREET CITY, STATE, ZIP

Previous Address _____
STREET CITY, STATE, ZIP

Residence Phone (____) _____ Cell Phone (____) _____ Work Phone (____) _____

E-mail Address _____

Are you a U.S. Citizen? ___ Yes ___ No If no, supply registered alien number or other proof of right to work in U.S. Non-citizen status will not affect your application if you have a legal right to work in the U.S.

Did you serve in the U.S. Military? ___ Yes ___ No If yes, indicate branch of service _____
And type of discharge _____

Will you require any accommodations to fulfill the tasks of this position? ___ Yes ___ No

Give details, if applicable: _____

Have you ever been employed by Pasco County ___ Yes ___ No If yes what dept? _____

Have you ever filed out an application for a career or volunteer position with Pasco County?
___ Yes ___ No If yes what dept. or volunteer Unit _____

EDUCATION

(Please include firefighting training, medical training, etc.)

- (CHECK ONE OR MORE) _____ High School Graduate (check only if you received a diploma)
_____ G.E.D.
_____ Jr. College Graduate
_____ College Graduate
_____ Other

(Explain) _____
List any degree held (AA,AS, BS, BA, MA, PhD, etc.)

_____ (Degree) _____ (Subject)

List subjects of special study or research work below:

List any courses taken related to the fire service or EMS service:

_____ (Course)	_____ (Certificate or degree)
_____ (Course)	_____ (Certificate or degree)
_____ (Course)	_____ (Certificate or degree)
_____ (Course)	_____ (Certificate or degree)

PLEASE ATTACH COPIES OF ANY CERTIFICATES OR DEGREES RELATED TO FIRE RESCUE.

Are you currently enrolled in any classes that may be related to fire rescue? _____ Yes _____ No
if yes, list class or classes below)

FIREFIGHTING or EMS EXPERIENCE

List all Departments that you have been previously associated with as a Volunteer or Career:

_____ (Department) _____ (Chief)

_____ (Address, City and State) _____ (Phone)

Position or Rank: _____ Years of Service: _____

_____ (Department) _____ (Chief)

_____ (Address, City and State) _____ (Phone)

Position or Rank: _____ Years of Service: _____

_____ (Department) _____ (Chief)

_____ (Address, City and State) _____ (Phone)

Poisson or Rank _____ Years of Service _____

List any other information related to your Fire Rescue experience that you feel should be considered:

Character References: List three personal references that are not relatives or former employers.
Please give name, address, and telephone numbers.

_____ Name _____ Address _____ Phone

_____ Name _____ Address _____ Phone

_____ Name _____ Address _____ Phone

Personal History

Have you ever been **convicted of a felony or a misdemeanor** (or similar offense by court martial); or **pled nolo contendere (no contest)** to such an offense; or **pled guilty to such an offense**? (Including all instances of the foregoing even if adjudication was withheld or if you were placed on probation).

Yes ___ No ___ if yes, indicate felony or misdemeanor and provide **city, state, court, crime committed, final disposition** of case, and **dates**: _____

Do you have a current Driver's License Yes ___ No ___ (A Driver's License is required for all positions.)

Do you have a current Commercial Driver's License Yes ___ No ___?

If yes, please include class and endorsement _____

Have you ever been convicted of any traffic violations? Yes ___ No ___ if yes, supply details:

APPLICANT CERTIFICATION - READ CAREFULLY BEFORE SIGNING

I hereby certify that each answer to any question herein and all other information otherwise furnished is true and correct. I further certify that all such answers and information constitute full and complete disclosure of my knowledge with respect to the questions or subject matter. **I understand that any incorrect, incomplete, or false statements or information furnished by me may subject me to disqualification or to discharge at any time, if I become a Volunteer Firefighter or First Responder in Pasco County. In addition I agree to comply with all agency orders, rules, and regulations.**

DATE _____ SIGNATURE _____

Disclosure to the Consumer (As Required by the 1997 FCRA, Section 604[b][2])

As a routine part of our due diligence effort, **Pasco County** intends to conduct a verification of your background. To ensure full compliance with the 1997 Fair Credit Reporting Act and to facilitate easy access to all information necessary, please read and sign this form.

I, _____, authorize all persons and entities (including, but not limited to, businesses, corporations, former supervisors, credit agencies, governmental agencies, law enforcement authorities, educational institutions, state insurance departments, the NASD, and all military services) to release all written and verbal information about me to Applicant Insights on behalf of Pasco County. I release and agree to hold each harmless from all liability and responsibility for doing so.

I specifically understand and authorize the procurement of an investigative consumer credit report and understand that in all likelihood it will contain information about my background, mode of living, character, general reputation, and personal characteristics.

I further understand that upon written request I will be given a list of the areas, which will be researched and included in the investigative report into my background.

This release, in original or copy form, is valid now or any time in the future. I agree with all the provisions shown in this disclosure form and have been provided a copy of this document.

Signature of Applicant _____ Date _____