



Roscoe Volunteer Fire Department Membership Application

Date							
First Name		Middle		Last			
Address							
Date of Birth							
Texas DL#		CDL	Yes		No		Expiration Date
Phone #							

IMPORTANT WARNING: Any false information on this application will lead to immediate denial or termination of membership.

Have you received any moving violations (tickets) in the last 5 years? If so, please list below.

Have you ever been convicted of a felony? If yes explain below.

Yes		No	

Are you or have you been in any other fire departments? If yes, please list department name and contact information.

Department Name		Contact #	
Department Name		Contact #	
Department Name		Contact #	

Please list any training certifications or experience you have. This includes any medical, firefighting, or FEMA ICS training or certifications. If accepted proof of the listed training or certifications will be required for your department personnel file.

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Please list any medical condition you have that could stop you from performing any /all duties of a Firefighter. This will not stop the application but will give RVFD placement value.

What do you see yourself doing while in the department? Are there any areas or positions that you would prefer to specialize in or learn more about? Where do you see yourself in the short term (1 year) and long term (5 years)?

By signing you agree ALL information is true, you agree to a background check. You release the Roscoe Volunteer Fire Department and any officer or member of any liability from this point forward.

Signature		Date	
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