



Godfrey Fire Protection District

Paid On Call Firefighter Application

Personal Information:

Last First Middle

Address City State Zip

Birthdate Phone(home) Phone(cell) email

Social Security # Drivers License #

Current Employer Job Title Start Date

Hours you will be most available (nights, weekends, days, etc.)

Spouses Name Number of children at home

Previous Fire Service Experience:

Education, Training, and Certifications:

High School

College

Relevant Training and Certifications

Health Information:

Is there any reason your present health condition would restrict your activities as a firefighter/emergency service provider? (if yes explain above)

Authorization For Release of Information:

I, _____, hereby give authorization to the GODFREY FIRE PROTECTION DISTRICT to obtain information from my employers, past or present, and to obtain information from any police agency concerning any arrest and/or driving violations against me.

Signature: _____ Date: _____

The above signature certifies that the above information is true and accurate.

Comments

How did you hear about Godfrey Fire Protection District?

OFFICE USE: Application Date Probation Date Active Date