

Manassas Volunteer Fire Company
9322 Centreville Road, Manassas VA 20110

Membership Application

Membership # _____ Date: _____
To be completed by MVFC

Name: _____
Last First Middle Suf.

Address: _____
Number Street City State Zip

Home Phone # _____ Work Phone # _____

SSN: _____ DOB: _____ US Citizen? Y/N _____

Driver's License # _____ State: _____ Class: _____

Height: _____ Weight: _____ Sex: _____ Blood type: _____

Hair color: _____ Eye Color: _____

EDUCATION

High School Attended: _____

Graduated? (Y/N) _____ GED? (Y/N) _____ Date: _____

College Attended: _____

Degree, Certificate or credits awarded: _____

Medical, Emergency Information

Use additional pages as needed

Do you have any physical conditions or illness that might prevent your full participation in fire company activities? (Yes/No) _____ If YES, explain: _____

Have you every had epilepsy or any other mental or nervous ailment, or been a patient in an institution for treatment of such ailment? (Yes/No) _____
If YES, Explain: _____

Emergency contact: _____
Name Relationship Phone #

Employment History

Start with most recent

1. Employer: _____ Phone: _____
Address: _____
Type of Work: _____ Dates Worked: _____
From To
Reason for Leaving: _____
2. Employer: _____ Phone: _____
Address: _____
Type of Work: _____ Dates Worked: _____
From To
Reason for Leaving: _____
3. Employer: _____ Phone: _____
Address: _____
Type of Work: _____ Dates Worked: _____
From To
Reason for Leaving: _____

Background Information

	Yes	No
Do you have any objection to the Manassas Volunteer Fire Company, Inc. checking with present and former employers as to your character and qualifications?	_____	_____
Have you ever served in the Armed Forces?	_____	_____
If separated from the Armed Forces, was separation under other than honorable circumstances?	_____	_____
Prior to submission of this application, were any of the members of this fire company personally known to you?	_____	_____
Have you ever had your driver's license suspended or revoked?	_____	_____
Have you ever been arrested for any violation other than minor traffic violations? If yes, explain in detail, using additional sheets as needed:	_____	_____

Carefully read, then sign the following statement:

I, _____ authorize the Manassas Volunteer Fire Company, Inc. to make a complete background check on me, including driving record, credit check and police record.

Signature: _____

Date: _____

Fire Company Experience

Have you even been a member or employee of another fire/rescue organization? YES/NO _____

If YES, Where? _____

Have you ever been removed from or refused membership in another company? YES/NO _____

List any fire and/or emergency medical training you possess which might make you a more valuable member of this company: _____

Virginia Fire/Rescue Certification(s) and dates of expiration (list and attach copies): _____

Do You Realize:

That if you are elected to the Manassas Volunteer Fire Company, Inc., it will be on a six month trial basis after which time the line officers of the Company will make a recommendation to the membership who will vote on permanent membership in the Company? YES/NO _____

That, if elected to probationary membership, you shall be expected to comply with all of the By-Laws of the Company or risk loss of membership? YES/NO _____

That your attendance will be required at fire company activities, resulting in considerable demands upon your time? YES/NO _____

That being a member does not give you any special privileges with respect to obeying all speed limits, traffic signals/devices when answering fire calls? YES/NO _____

That you shall be expected to complete (at Company expense) a physical examination before being voted on for probationary membership? YES/NO _____

That you shall be expected to serve on an assigned fundraising crew (Bingo) according to the posted schedule? YES/NO _____

That all members are expected to regularly attend scheduled drills? YES/NO _____

That no member of the Company shall appear at a company meeting, report for duty, or respond on any call while under the influence of alcohol or drugs, nor shall a member use insulting, indecent or otherwise improper language while representing the Company in any capacity or participating in any Company function under penalty of expulsion? YES/NO _____

Medical Investigation

I, _____ authorize the Manassas Volunteer Fire Company, Inc. to include a drug screening test as part of the mandatory physical examination and all results of this examination to be released to the Manassas Volunteer Fire Company, Inc.

Signature: _____

Date: _____

I, the undersigned, certify that I have read and fully understand this form in its entirety and that the information herein is true and complete to the best of my knowledge. I understand that, should any statement I make prove false, misleading or erroneous, it may result in the rejection of my application or in my discharge from the Manassas Volunteer Fire Company, Inc. Upon resignation or termination of my membership, I agree to return all items issued by the Company, including, but not limited to radios, protective gear, uniforms, and any other items entrusted to me.

Signature: _____

Date: _____

Applicant - do not write below this line

Sponsoring Members:

	Name (Print)	Signature	Date:
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Membership Committee Use

1.	Date Application Filed: _____	Received By: _____
2.	Date of Probation: _____	
3.	Date of Permanent Membership: _____	
4.	Date of Police Check: _____	By: _____
5.	Date of Driving Check: _____	By: _____
6.	Date of Employment Check: _____	By: _____
7.	Date of Physical Exam Review: _____	By: _____
8.	Date Applicant given SOP book: _____	By: _____
9.	Date Applicant given copy of Bylaws: _____	By: _____

Membership Committee Comments