



1176 Old York Road Abington, PA 19001 | 267-536-1055 | <a href="www.AbingtonPA.gov">www.AbingtonPA.gov</a> | <a href="www.AbingtonPA.gov">www.AbingtonPA.gov

### **APPLICATION FOR MEMBERSHIP**

☐ Abington Fire	Co.   McKin	ley Fire Co. □ We	ldon Fire Co.   □ Edg	ge Hill Fire Co.	□ Rosly	n Fire Co.			
Name:			Phone:						
Last	First	M.I.	Home:						
Address:			Emergency Con	itact:					
Number	Street	Apt.	Name						
City	Zip		Relationship						
Email:			Phone:						
Position App	lying For:								
<u>EDUCATION</u>									
	Name (	of School	Location		of Years ttended	Gradu- ate?			
High School									
College									
Trade School									
FIRE COMPANY EXPERIENCE									
Previous Fire Company Dates of Name		Dates of Service	Highest Position Held	Reason for Leaving?		ing?			





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### **EMPLOYMENT INFORMATION**

Employer Name:		Job Title:					
Address:		Duties:					
Phone Number:		Supervisor Name:					
Use the space below to detail any special skills, training or qualifications relevant to the position for which you are applying that are not covered elsewhere in this application (such as professional licenses or certificates, military training, skills in operating machines/equipment, technical skills or other special training). Please provide copies of any certifications.							
REFERENCES  (Provide names & contact information for three people not related to you whom you have known for at least one year)							
Name	Addres	es	Occupation	Years Known			
1.							
2.							
3.							





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### **ADDITIONAL INFORMATION**

1.	Are you able, without accommodation, to perform all of the essential functions of the job for which you are applying?  Yes No						
2.	Are you able, with accommodation, to perform all of the essential functions of the job for which you are applying?  Yes No						
3.	yes, please describe the accommodation(s) that you need?						
4.	Are there any functions of the job for which you are applying that you cannot perform with or without accommodation? If so, please describe.						
5.	Are you eligible to work in the United States? Yes No						
6.	Do you have a valid driver's license? Yes License # No						
	<u>CERTIFICATION</u>						
for shi me for AT wo as kn that con the ene ma	TFD) Fire Company, I must complete all application materials provided to me with this application (set the thin detail on page 4). If I refuse to provide all application materials, I will not be considered for memberate.  By signing below and completing all application materials, I am indicating my desire to become a sember of the ATFD fire company for which I am making application as a volunteer, and I pledge to content to all rules, regulations and bylaws of said fire company, all Standard Operating Guidelines of the TFD, to obey the orders given me by those in authority, to answer all calls, attend all training, meetings, ork details and special events to the best of my ability and to conduct myself at all times in such a manner no to discredit or embarrass the fire company or the ATFD in any way.  I certify that the information provided by me in this application is true and accurate to the best of my owledge and understand that any false statements shall be grounds for immediate dismissal. I understand at nothing contained in this application or the granting of an interview is intended to create an employment intract between myself and the ATFD and/or the fire company for which I am making application.  I authorize the ATFD and/or the fire company for which I am making application the right to make a brough investigation into my employment, criminal history, education, driver history, education and referces, and I release from all liability all persons, companies, and corporations from supplying such infortion. I release, indemnify, and hold harmless the ATFD, Township of Abington and all ATFD Fire Companies from any and all liability which might result from making such an investigation.						
	Signature Date						

Date

Parent/Guardian Signature





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### **NEW APPLICANT CHECKLIST**

Application Materials	Date Received					
Membership Application						
Job Description						
New Member Probation Guidelines						
New Member Handbook Acknowledgement						
Pennsylvania State Police Criminal History						
Pennsylvania Child Abuse History Clearance						
Driver's History Request Form						
Substance Abuse screening Information						
Medical Screening/Clearance by Physician						
Copy of Driver's License						
Legal Guidelines for Junior Member Applicants (if under 18 years)						
Working Papers for Junior Member Applicants (if under 18 years)						
ATFD Discipline Policy Acknowledgement						
Other Fire Company Policies & Procedures						
FIRE COMPANY USE ONLY						
Date of Interview: Recommended for Membership	e: YES NO					
Investigating Committee Signatures:						
Membership Application Date:						
Membership Acceptance Date: Rack/Plug #:						