



VOLUNTEER FIRE DEPARTMENT MEMBERSHIP APPLICATION

Please check which Department you are interested in:

- Cold Springs
 Galena
 Peavine
 Verdi
 Washoe Valley

Please check which area you would like to volunteer for:

- Fire
 EMS
 Logistics/Support

NAME: LAST		FIRST	MIDDLE INITIAL	
CURRENT MAILING ADDRESS:		CITY	STATE	ZIP
HOME PHONE:	BUSINESS/MSG PHONE:	VALID DRIVER'S LICENSE: NUMBER/STATE/EXP. DATE CLASS:		
CONVICTION: Have you ever been convicted of a felony or misdemeanor other than minor traffic violations? (Include drunk, reckless, hit-run, and military convictions) [] Yes [] No Note: a conviction is not necessarily a bar to employment. LACK OF REQUESTED INFORMATION IS BASIS FOR REJECTING AN APPLICATION. PLEASE EXPLAIN CONVICTIONS BELOW.				
CONVICTION DATES & NATURE (Use additional sheet if necessary):				
LIST ANY PREVIOUS FIRE/RESCUE DEPARTMENT EXPERIENCE:				

Please check certifications you currently hold and attach a copy of each:

- Firefighter I
 First Responder
 CPR
 Basic Wildland
 Firefighter II
 EMT (B, I)
 HazMat
 Other _____

EMPLOYMENT INFORMATION	PROFESSIONAL REFERENCE
NAME:	NAME:
ADDRESS:	ADDRESS:
PHONE:	PHONE:

Briefly state why you wish to join the Department:

I have received, read and understand the Bylaws of the Department. I also understand that becoming a member of any of the Sierra Fire Protection Volunteer Fire Departments incurs specific member commitments, responsibilities and duties as described in the Bylaws. A complete application with all required certificates and records will be placed on a waiting list pending action by the Review Board. The Review Board will then determine acceptance or rejection of the application within 30 days. Falsification of any information on this application will result in immediate termination.	
Signature	Date

4000 Joy Lake Rd.
Reno, NV. 89511



Phone: (775) 849-1108
Fax: (775) 849-1636

I authorize Sierra Fire Protection District to contact any employer or individual that I have listed on my employment application and/or resume or mentioned in job interviews, to obtain from them any relevant information regarding my previous employment, military service, criminal history, characteristics or traits, or other qualifications for employment and/or continued employment with Sierra Fire Protection District. I further authorize Sierra Fire Protection District to contact any institution and/or licensing authority for job-related information regarding education, licenses, and/or certificates which I may currently hold or may have held in the past.

In exchange for Sierra Fire Protection District consideration of my employment application, and/or my continued employment with the above mentioned agencies, if any, I authorize anyone possessing this information to furnish it to Sierra Fire Protection District upon request, and I release the individual company or institution and all individuals providing the information or acquiring the information, including Sierra Fire Protection District, from all claims, liability, and damages whatsoever in furnishing, obtaining, or using said information including, but not limited to, claims for defamation, libel, slander, infliction of emotional distress, and interference with current or prospective economic relations.

I further understand this consent will apply during the course of my employment with Sierra Fire Protection District, should I obtain such employment. I understand and agree this consent shall remain in effect indefinitely.

Additionally, my signature below certifies that the information provided is true and correct to the best of my knowledge. I understand that my employment may be contingent upon taking and passing a medical examination and passing a background investigation. I also understand that, if employed, I will be in probationary status for up to 12 months and that I will be photographed and fingerprinted.

Signature of Applicant: _____ **Date:** _____

Signature of Witness: _____ **Date:** _____

Please return this along with a copy of your driving record.

CONSENT AND DISCLOSURE

- I. I understand that in connection with my application for volunteer firefighter a consumer report/ investigative consumer report may be requested. The report may contain information as to my character, general reputation, personal characteristics or mode of living. It may include, but is not limited to, information concerning criminal records, civil actions, tax liens, bankruptcies, and other items of adverse information. It may also include but is not necessarily limited to, verification of current and previous employment, verification of educational credentials, professional reference verification, credit report, and motor vehicle report. The consumer report/investigative consumer report will be requested from the following Consumer Reporting Agency: **MCSS, Ltd 1495 Ridgeview Drive, Suite 210 Reno, NV 89519.**
- II. I understand that according to the Fair Credit Reporting Act, prior to taking an adverse action based, in whole or in part, on the information contained in the consumer report/investigative consumer report, a copy of the consumer report as well as a written summary of my rights under the Fair Credit Reporting Act will be provided to me. Upon written request, within a reasonable period of time after my receipt of this disclosure, a complete and accurate disclosure of the nature and scope of any investigative consumer report, which may involve personal interviews with sources such as neighbors, friends and associates will be made to me. This disclosure shall be made in writing no later than five days after the date on which the request for such disclosure was received or such report was first requested, whichever is later.
- III. The information requested will be used in compliance with the Fair Credit Reporting Act, the Federal Americans with Disabilities Act (ADA) and/or any other applicable federal or state laws. Furthermore; I understand that if I am denied employment because of information contained in whole or in part, in my consumer report I have the right to be notified and given the name and address of the agency or source that provided the information.
- IV. I hereby authorize, without any reservation, any law enforcement agency, school, employer, reference, information service bureau, institution, or insurance company contacted by MCSS, Ltd. or its agents, to furnish the information described in Section I.
- V. I understand that a FAX or photographic copy of this release shall be valid as the original.
- VI. I hereby release the agents and employers and all other persons, agencies, and entities providing information or reports about me from any and all liability arising out of the request for or release of any of the above-mentioned information or reports.
- VII. I have read and understand this Disclosure and Consent form. By my signature below, I consent to the release of a consumer and/or investigative consumer report, as defined above, in conjunction with my application for employment.
- VIII. I understand that my consent will apply throughout my employment, to the extent permitted by law, unless I revoke or cancel my consent by sending a signed letter or statement to the company at any time.

Signed

Date

Printed Name (First, Middle, Last)

Maiden or Other Names Used

Social Security Number

Birth Date

Driver License Number and State

Prospective Employer