



NORTH OYSTER FIRE DEPARTMENT MEMBERSHIP APPLICATION

PERSONAL DATA

Last Name			First Name			Middle Initial				
Present Address						Years at address				
City			Province			Postal Code				
Home Telephone ()			Business Telephone ()			Are you currently Employed?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Do you hold a valid BC Drivers License?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	Class:		Employer's Name:			
Are you willing to submit a drivers abstract?			Yes <input type="checkbox"/>		No <input type="checkbox"/>		Employer's Location:			
Are you willing to undergo A criminal record check?			Yes <input type="checkbox"/>		No <input type="checkbox"/>		Are you willing to submit the results of a medical exam?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name and contact number of a personal reference										
Name and contact number of a personal reference										

EDUCATION

Elementary School						Secondary School						College or University					Graduate or Professional				
Year Last Attended																					
Level Completed	4	5	6	7	8	9	10	11	12	13	1	2	3	4	5	1	2	3	4	5	
Certificates, Diplomas, Degrees Obtained																					
Course of Study																					
List any other specialized education, apprenticeship skills or professional designations:																					

TRAINING

Have you served as a volunteer Fire Fighter in the past?			Yes <input type="checkbox"/>		No <input type="checkbox"/>	
If yes, where?			When?			
Do you wish to be a First Responder?			Yes <input type="checkbox"/>		No <input type="checkbox"/>	
If yes, do you have a valid First Aid/CPR certification?			Yes <input type="checkbox"/>		No <input type="checkbox"/>	
Level?			Expiry Date:			
List any other training you have taken (by date), which would be of benefit to a volunteer fire fighter.						
What days/times would you be available for training and practice? Example:						
			Sunday 8 am-9 pm			
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

PLEASE READ CAREFULLY

The foregoing statements are correct to the best of my knowledge. I understand that any misrepresentation may be cause for my dismissal. If accepted as a Fire Fighter, I agree to abide by all rules and regulations of the CVRD and the North Oyster Fire Department, including serving an initial probationary period and notifying the department should any of the above change.

Applicant Signature: _____

Date: _____