

VANCEBORO RESCUE SQUAD

PO Box 439
Vanceboro, NC 28586

APPLICATION FOR MEMBERSHIP

Name _____ Soc. Sec _____
(Last) (First) (Middle)

Street Address _____ Mailing Address _____

City, State, Zip _____ City, State, Zip _____

North Carolina Driver's License # _____ Expires _____

Home Phone # (____) _____ Pager or Cell Phone # (____) _____

Employer _____ Supervisor _____

May we contact this employer? **YES** or **NO** Phone # (____) _____

1. Are you currently certified as a MR, EMT, EMT-I, or EMT-P? _____ (If **NO**, answer #2)
If **YES**: Indicate Level _____ State or National _____ Expiration date _____

2. Are you currently enrolled in a class to obtain one of the above certifications? **YES** or **NO**
Where? _____ Projected completion date _____

3. Have you ever been a volunteer or employee of a rescue squad, ambulance service, or fire department? **YES** or **NO** (If yes, list name of the organization, the Chief or Captain, and contact phone #)

4. List any medical or rescue training you have completed, list type and dates.

5. Have you ever been convicted of any traffic violation(s)? **YES** or **NO**. If yes, list the date(s), conviction(s), and the disposition(s).

Date

Conviction

Disposition

6. Have you ever been convicted of a felony or misdemeanor? **YES** or **NO** If **YES**, list the date(s), conviction(s), and the disposition(s).

Date

Conviction

Disposition

Please acknowledge the following. (If **NO** give reason.)

- A. I will perform assigned duty on rotating schedule. **YES** or **NO** _____
- B. I will attend business meetings. **YES** or **NO** _____
- C. I will abide by the Constitution and By-Laws of the Squad. **YES** or **NO** _____
- D. I will abide by the laws of North Carolina. **YES** or **NO** _____
- E. I will participate in fundraising events, training drills. **YES** or **NO** _____
7. Do you know any members of Vanceboro Rescue Squad? **YES** or **NO** If **YES**, list them:

IMPORTANT!! READ CAREFULLY

I CERTIFY THAT ALL INFORMATION ON THIS APPLICATION IS **TRUE** AND **CORRECT**. I UNDERSTAND THAT FALSIFYING ANY INFORMATION IS GROUNDS FOR DENIAL OR TERMINATION OF MEMBERSHIP AT ANYTIME. I UNDERSTAND THAT DMV, CRIMINAL, AND EMPLOYMENT CHECKS CAN AND WILL BE USED BY THE PERSONNEL COMMITTEE IN MAKING THEIR RECOMMENDATION OF ACCEPTANCE OR DENIAL OF THIS APPLICATION FOR MEMBERSHIP. MY SIGNATURE HEREBY AUTHORIZES ALL INDIVIDUALS AND ORGANIZATIONS NAMED OR REFERRED TO IN THIS APPLICATION AND ANY LAW ENFORCEMENT AGENCY TO GIVE VANCEBORO RESCUE SQUAD ALL INFORMATION RELATIVE TO SUCH VERIFICATION. I ALSO UNDERSTAND THAT VANCEBORO RESCUE SQUAD MAY USE A "THIRD PARTY" TO OBTAIN INFORMATION RELATIVE TO THIS APPLICATION.

(Signature of Applicant)

(Date)

For Squad Use Only

Date application was read to squad or posted, and presented to Personnel Committee. _____

Personnel Committee

After investigation by us the Personnel Committee we verify that all the information is **CORRECT / NOT CORRECT**. We further make the following recommendation. **ACCEPT** or **DENY**

Chairman of Personnel Committee _____
(Signature)

Date application voted on by squad _____

Squad's decision on application. **ACCEPT** or **DENY**

President _____
(signature)