

# West Seneca Fire District No. 3

2400 Berg Road, West Seneca, N.Y. 14218  
Phone: 716-675-2300 • Fax: 716-674-8568



*Board of Fire Commissioners*

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## **APPLICATION FOR VOLUNTEER FIREFIGHTER**

Qualified applicants are considered without regard to race, color, creed, sex, national origin, age, marital or veteran status.

PLEASE PRINT

Date of Application \_\_\_\_\_ Social Security # \_\_\_\_\_

Name \_\_\_\_\_  
(FIRST) (MIDDLE) (LAST)

Address \_\_\_\_\_  
(STREET) (TOWN/CITY) (COUNTY) (STATE) (ZIP)

How long have you lived at the above address? \_\_\_\_\_

Previous Address \_\_\_\_\_  
(STREET) (TOWN/CITY) (COUNTY) (STATE) (ZIP)

Phone # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Email \_\_\_\_\_

### **DRIVE INFORMATION**

Driver License Number \_\_\_\_\_ State License Issued \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_  
(NAME) (ADDRESS) (PHONE)

### **PLEASE ANSWER THE FOLLOWING QUESTIONS**

Failure to answer all questions may result in disqualification for membership.

Have you previously filed an application with this organization or been a member with any other fire company?

Yes ( ) No ( )

If yes, Company Name : \_\_\_\_\_ Phone # \_\_\_\_\_

Do you have any previous firefighting experience? Yes ( ) No ( )

Do you have any friends or relatives who are presently members of this organization? Yes ( ) No ( )

If yes, list name(s) \_\_\_\_\_

Have you ever been convicted of a misdemeanor or felony? Yes ( ) No ( )

Have you ever been convicted of any traffic violations or motor vehicle violations? Yes ( ) No ( )

If yes, list violations here: \_\_\_\_\_

Have you ever been convicted of an arson-related crime? Yes ( ) No ( )

Do you have any pending violations/convictions at this time? Yes ( ) No ( )

If yes, list pending violations/convictions here: \_\_\_\_\_

Are you a veteran of the United States Military Service? Yes ( ) No ( )

Do you have any physical, mental, or medical impairment or disability that would limit your job performance?

Yes ( ) No ( ) Maybe ( )

If necessary, please explain: \_\_\_\_\_

Are you presently a member of any other civic organization? Yes ( ) No ( )

If yes, please list: \_\_\_\_\_

Availability for membership? ( ) Day Worker ( ) Afternoon Worker ( ) Night Worker

Can you attend evening meetings and drills (generally Monday night) Yes ( ) No ( )

If no, please explain: \_\_\_\_\_

### **EMPLOYMENT**

List all places of employment for the past five years (most current first)

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone # \_\_\_\_\_ How long did you work there? \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone # \_\_\_\_\_ How long did you work there? \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone # \_\_\_\_\_ How long did you work there? \_\_\_\_\_

**EDUCATION**

List the requested information concerning all schools which you have attended:

COLLEGE:

	Name	Location	Type of Degree	Dates From/To
COLLEGE	_____			
COLLEGE	_____			
HIGH SCHOOL	_____			

Are you a high school graduate? Yes ( ) No ( )

Do you possess a high school equivalency or G.E.D. Diploma? Yes ( ) No ( )

List any other skills or training you may have obtained that is not listed concerning your application (includes hobbies or other interests). \_\_\_\_\_

Please list names, addresses and telephone numbers for three (3) references not related to you. **NOTE: References will be checked.**

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

**CONSENT FOR DISCLOSURE**

I, \_\_\_\_\_ give the Investigation officer of West Seneca Fire District # 3 and Reserve Hose Fire Company my consent to make inquiries of my employers, neighbors, police agencies and Insurance carrier while conducting an investigation of my character, past record and responsibility.

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_

**Interviewed by:**

Commissioner Board: \_\_\_\_\_ (Date) Chief \_\_\_\_\_ (Date)

Board of Directors: \_\_\_\_\_ (Date) President: \_\_\_\_\_ (Date)

Date of Acceptance: \_\_\_\_\_