

FIRE DISTRICT NO.2, TOWNSHIP OF OCEAN

2001 SUNSET AVENUE
OCEAN, NJ 07712

APPLICATION FOR VOLUNTEER MEMBERSHIP

In

Wanamassa Fire Company No.1

PLEASE PRINT ALL INFORMATION REQUESTED CLEARLY

GENERAL INFORMATION SECTION

- a. All information requested is to be given.
- b. If a question or information does not apply to you, write "N/A in the blank.
- c. If more room is needed, use the reverse side or attach additional sheets.
- d. The District has the right to have the applicant submit to physical and psychological examinations.
- e. The District has the right to require any additional information if needed.
- f. The District has the right to make inquiries to verify the information given, and to investigate the applicant.

PLEASE TAKE NOTE OF THE FOLLOWING

The following requirements will be explained at your interview

Fingerprints are required for ALL applicants, prior to final acceptance in the organization. The applicant must call the Detective Bureau, Township of Ocean Police Department, Deal and Monmouth Road, Oakhurst, NJ., at 732-531-1428 in order to make an appointment. Walk-ins will not be accepted by the Police Department.

You will also be required to have a physical examination prior to final acceptance in the organization.

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FIRE DISTRICT NO.2, TOWNSHIP OF OCEAN

GENERAL INFORMATION

Continued

1. Date: ____/____/____

2. Name: _____
LAST FIRST MIDDLE

3. Date of Birth ____/____/____ a. Current Age: _____
Month Day Year

4. Social Security Number: _____

5. Marital Status [] Married [] Single a. Children # _____ b. Ages: _____

6. Present Address: _____

7. Previous Addresses for past five (5) years:

a. _____

b. _____

c. _____

d. _____

e. _____

8. Driver License No. _____ State _____ Class _____ Exp. Date _____

9 Telephone Numbers: Home - _____ OR Cell - _____

E-Mail address _____

10. What telephone number is best to call you at? [] Home [] Cell

11. Are you a citizen of the United States of America? [] YES [] NO

12. Are you able to read/understand and write the English Language? [] YES [] NO

13. Highest educational level completed _____

FIRE DISTRICT NO.2, TOWNSHIP OF OCEAN

MEDICAL SECTION

CONFIDENTIAL DISTRICT USE ONLY

1. Do you have, or have you ever been treated for any physical or psychological injury, or disability that could affect you while performing in a emergency situation?

YES NO If yes, describe in detail

2. Do you have any physical conditions which may limit your ability to perform the specific duties required by the organization to which you are applying?

YES NO If yes, describe said condition and explain how you will be able to overcome it's limitations.

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FIRE DISTRICT NO.2, TOWNSHIP OF OCEAN

MEDICAL SECTION

Continued

**CONFIDENTIAL
DISTRICT USE ONLY**

3. Do you have any, or have you ever been treated for any, substance abuse problems?
(including alcohol).

YES NO If yes, describe in detail

FIRE DISTRICT NO.2, TOWNSHIP OF OCEAN

CRIMINAL SECTION

1. Have you ever been arrested and or convicted or plead guilty to a crime which has not been Annulled, Expunged or Sealed by the Court?

YES NO If yes, describe in full including crime, date and jurisdiction.

If charges were dismissed or expunged attach documentation from court

FIRE DISTRICT NO.2, TOWNSHIP OF OCEAN

MOTOR VEHICLE

1. State all violations of motor vehicle laws of which you have been convicted or pleaded guilty to, stating for each the nature of the offense, date of plea or conviction, and disposition, to the best of your ability.

VIOLATION DATE DISPOSITION LOCATION

2. Are there any charges pending against you involving motor vehicle laws?
 YES NO. If yes, complete the natures of the charges, in what court are they pending and any court dates on which the same will be heard.

VIOLATION COURT DATE LOCATION

FIRE DISTRICT NO.2, TOWNSHIP OF OCEAN

EMPLOYMENT SECTION

1. List all employment for the past five (5) years, most current being the first.

Employer Name and address:	Date of employment	Description of work
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		
6. _____		

REFERENCE SECTION

Please list the names, addresses and phone numbers of at least three (3) references who are not relatives and are not affiliated with the organization you are applying for and have known you for at least three (3) years; Also, notify said persons that the organization may be contacting them.

NAME	ADDRESS	PHONE
1. _____		
2. _____		
3. _____		

ADDITIONAL COMMENTS

Set forth any additional matters you wish to be considered.

FIRE DISTRICT NO.2, TOWNSHIP OF OCEAN

WANAMASSA FIRE CO. SECTION

1. Do you currently hold a Firefighter I certificate? If so NJ state ID # _____
 YES : NO

If yes, please include certificates with application

2. Were you previously a member of a Fire Police Unit?
 YES NO

3. Set forth in detail your experience as it relates to firefighting or Fire Police, including dates, location and Company / Department

Continued on next page

FIRE DISTRICT NO.2, TOWNSHIP OF OCEAN

**WANAMASSA
FIRE CO. SECTION**

Continued

4. If you have been a member of an emergency service organization, have you ever had any charges or discipline while at such organization? If yes explain in detail:

FIRE DISTRICT NO.2, TOWNSHIP OF OCEAN

AGREEMENT

AUTHORIZATION TO RELEASE INFORMATION

Part 1 of 2

This application hereby authorizes Fire District No.2, Township of Ocean, County of Monmouth and State of New Jersey and/or The Investigating Committee of the Wanamassa Fire Co., First Aid Squad or Fire Police to contact applicant's past employers, all persons mentioned in this application, and all other persons with respect to obtaining and / or verifying information in connection with this application.

Applicant agrees to sign any information authorization which may be required.

The facts set forth in my application for entrance into the respective organization are true and complete. I understand that in acceptance, any false statements on this application may result in my dismissal. I further understand that this application is not a contract for acceptance, nor does this applicant obligate the Fire District No.2, Township of Ocean, County of Monmouth and State of New Jersey in any way.

You, Fire District No.2, Township of Ocean, County of Monmouth and State of New Jersey and / or Investigating Committee of the Wanamassa Fire Co., First Aid Squad or Fire Police are hereby authorized to make any investigation of my personal history by my signing on the attached “**Authorization To Release Information**” form that is attached.

Signature of Applicant

Print Name

Date

FIRE DISTRICT NO.2, TOWNSHIP OF OCEAN

AUTHORIZATION TO RELEASE INFORMATION

Part 2 of 2

TO WHOM IT MAY CONCERN:

I hereby request and authorize you to furnish Fire District No.2, Township of Ocean, County of Monmouth and the State of New Jersey with any and all information they may request concerning my work record, educational history, military record, financial status, criminal record, general reputation and past or present medical condition. This authorization is specifically intended to include any and all information of a confidential or privileged nature, as well as photocopies of such documents, if requested. The information will be used for the purpose of determining my eligibility for membership in the respective emergency organization.

I hereby release you and your organization from any liability which may or could result from furnishing the information requested above or from any subsequent use of such information in determining my qualifications to serve as an emergency response person.

Signature

A Photocopy of this authority will be considered as effective and valid as the original.

NOTE: This form may be retained in your files.

revised 1/2023