

Indiana Fire Association



Membership Application

(revised June 2018)

Please make sure this membership application is filled out completely.

Those applications submitted that are found to be incomplete or have false information will be dismissed from consideration for membership. Please use the check list below to ensure the completeness of the application and its attachments prior to submission.

- Application is filled out completely
- Photocopy of Valid Driver's License
- If applicable, copies of any and all Fire / EMS certificates the candidate has obtained during his / her prior service.

Candidate Name: _____

Two IFA Sponsors are Required

- 1) IFA Member (print & sign) _____
- 2) IFA Member (print & sign) _____

At a minimum, please complete all shaded areas or your application will be considered incomplete!

Fire Dept Use:

FF Receiving Candidate Application (print & sign) _____

Date Received _____



Indiana Fire Association

Application for Volunteer Firefighter

The Indiana Fire Association is an Equal Opportunity Organization. All qualified applicants will be considered without regard to race, color, religion, national origin, ancestry, sex, disabilities or age. Reasonable accommodations for the needs of otherwise qualified applicants with disabilities will be made upon request. All information requested on this application form is solicited for the purpose of determining abilities and skills required to carry out the duties and functions of a firefighter and to facilitate verification of the information requested.

| | | | | | |
|--------------------------------|--|---------------|------------------------|--|-------|
| Last Name | | First Name | | Middle Name | |
| Complete Current Address | | | | How long at this address (list additional former home addresses below to complete a 10-year history) | |
| Primary Phone | | Date of Birth | | Email Address | |
| Alternate Current Home Address | | | Social Security Number | Driver's License Number | State |
| Previous Home Address #2 | | | | Dates From _____ to _____ | |
| Previous Home Address #3 | | | | Dates (use back of form if additional space is needed) From _____ to _____ | |

| | | | |
|---|----------|-----|----|
| Are you at least 18 years old? | Yes | No | |
| Are you currently attending IUP or any other educational institution? | Yes | No | |
| Are you a current resident of the IFA service area? | Yes | No | |
| Do you have any previous firefighting or EMS experience? | Yes | No | |
| Do you have a valid Driver's License? (Please submit a photocopy) | Yes | No | |
| Do you consent to a criminal background check? | Yes | No | |
| Do you currently have any criminal charges pending/unresolved in any state? | Yes | No | |
| Have you been charged or convicted (found guilty, pled guilty or pled nolo contendere), received probation without verdict or accelerated rehabilitative disposition (ARD), as to any criminal charges, felony or misdemeanor, including any drug law violations? Note: You are not required to disclose any ARD or other criminal matter that has been expunged by order of a court. | Yes | No | |
| Are you available to respond to calls during the | Daylight | Yes | No |
| | Evenings | Yes | No |
| | Weekends | Yes | No |
| Are you available to attend training on Thursday evenings? | Yes | No | |
| May we contact your current employer? | Yes | No | |
| If yes, name/number of contact at your workplace | | | |
| Name: _____ Phone: _____ | | | |

| EDUCATION | | | | | |
|--|----------|--------------------------|-------------------------------|---|--|
| Last High School Attended: | | Highest grade completed: | | Do you have a high school diploma or GED Certificate? | |
| _____ | | 9 10 11 12 | | YES NO | |
| Name | | Location | | | |
| Colleges, universities, trade schools, technical schools or apprenticeship programs: | | | | | |
| Name | Location | Number of Years | Degree, Credits, Certificates | | |
| | | | | | |

FIRE OR EMS EXPERIENCE (If applicable)

Required for those wishing for college membership

| | | | |
|--|----------|--|-----------|
| Department | Location | Dates Served From To | Rank Held |
| Certifications and Specialized Training (Attached Copies Required) | | | |
| | | | |
| Department | Location | Dates Served From To | Rank Held |
| Certifications and Specialized Training | | | |
| Chief or President to be contacted | | Phone number of dept contact | |

Attach separate list if necessary.

MILITARY

| | | |
|----------------------|----------------------|--------------------|
| Branch of Service | Length of Service | Rank at Separation |
| Reserve Requirements | Specialized Training | |

OTHER QUALIFICATIONS

| | |
|---|---|
| Describe the types of equipment you are capable of operating (machines, vehicles, computers, etc.). | List any trade, professional or skills certificates you hold. |
| Summarize special skills, abilities or experiences that may qualify you for this position. | |

EMPLOYMENT HISTORY

| | |
|-----------------------|---|
| Employer | Job Title |
| Address | Dates Employed From To |
| Description of Duties | Supervisor's Name |
| Reason for Leaving | Will this Supervisor give you a good reference? <div style="text-align: center;">YES NO</div> |

EMPLOYMENT HISTORY

| | |
|-----------------------|---|
| Employer | Job Title |
| Address | Dates Employed From To |
| Description of Duties | Supervisor's Name |
| Reason for Leaving | Will this Supervisor give you a good reference? <div style="text-align: center;">YES NO</div> |

| EMPLOYMENT HISTORY | |
|-----------------------|--|
| Employer | Job Title |
| Address | Dates Employed From _____ To _____ |
| Description of Duties | Supervisor's Name |
| Reason for Leaving | Will this Supervisor give you a good reference? YES NO |

| REFERENCES | | |
|---|--------------|--------------|
| Please list three PROFESSIONAL references (other than relatives or former employers): | | |
| Complete Name and Address | Phone Number | Relationship |
| 1. | | |
| 2. | | |
| 3. | | |

Please attach a resume if available.

| Initial | Certification, Authorization and Agreement |
|---------|--|
| _____ | "I certify that the information supplied by me on this application form and in my resume, if any, is true and complete and does not contain any falsifications, omissions, or concealments of material fact. I authorize the Indiana Fire Association to investigate the truth of this information and of any other information I may supply during a pre-membership interview. I further authorize every school, employer, person and agency identified by me on this form or in my resume to release any and all verifying information the Indiana Fire Association may solicit from it or them. I further authorize the Indiana Fire Association to investigate my criminal history and other aspects of my personal history, including my character and general reputation. If my application is denied in whole or in part because of information contained in a criminal history records report, the Indiana Fire Association will so advise me. |
| _____ | "I hereby release all law enforcement agencies, my former employers, all educational institutions and programs and every other person identified by me on this form or in my resume from liability for any damage or injury to me arising out of the release of information requested by the Indiana Fire Association. |
| _____ | "I further understand that the IFA does not guarantee anyone membership for any specific length of time. I therefore agree that, if I am accepted, my membership may be terminated either by me or by the Indiana Fire Association at any time without notice or cause. |
| _____ | "I further understand and agree that any offer of membership the IFA may make to me (and, if I am accepted, my continued membership) will be contingent upon my submission of evidence verifying that I am authorized to work in the United States and shall be contingent upon my taking and passing physical examinations, continued clean criminal record, and drug tests. I understand that any criminal charges and/or suspensions / revocations of my driving privileges (Loss of License) must be immediately reported to my supervisor and may, pending review, lead to my dismissal from the department. |
| _____ | "I further understand that I will be required to undergo drug testing immediately and prior to being placed in an active service role with the IFA and that a failure of said test will lead to immediate dismissal from the department. I understand that failure of any subsequent drug tests that may be administered throughout my service with the IFA will also lead to an immediate dismissal from the department. |
| _____ | "I certify that I am not a party to any contract or other obligation which would limit, interfere with or restrict my membership in the IFA in any way. |
| _____ | "I hereby acknowledge that I have read this section of the employment application and fully understand the meaning and effect of signing this form." |

Indiana Fire Association
501 Philadelphia St
Indiana, PA 15701
724-465-2400

Applicant Signature

Date

Indiana Fire Association

Membership Committee

2018 Interview Dates

July 9, 2018

August 13, 2018

September 10, 2018

October 8, 2018

November 12, 2018

December 10, 2018

2019 Interview Dates

January 14, 2019

February 11, 2019

March 11, 2019

April 8, 2019

May 13, 2019

June 10, 2019

July 8, 2019

August 12, 2019

September 9, 2019

October 14, 2019

November 11, 2019

December 9, 2019

Firefighters typically encounter/perform the following:

- Drive firetrucks and other emergency vehicles (a CDL is required for IFA)
- Face unique occupational health risks due to the demands of their job
- Operate in harsh work environments (excessive heat, emotionally charged situations, dense smoke, extreme physical challenges, toxic chemicals)
- Put out fires using water hoses, fire extinguishers, and water cans
- Find and rescue victims in burning buildings or in other emergency situations
- Treat sick or injured people
- Extricate and rescue occupants in crashed vehicles, confined spaces and hazardous situations
- Carrying up to 75 pounds of PPE, depending on the job
- Breathe compressed air
- Prepare written reports on emergency incidents
- Clean and maintain equipment
- Conduct drills and physical fitness training, attend meetings and participate in functions & activities
- Represent a distinct subset of the general population

ARE YOU CAPABLE AND UP TO THE TASK?