



MEMBERSHIP APPLICATION

Application Returned: _____
 Date of Hire _____
 Approved for Probation _____
 HRA VEBA
 Volunteer Board of Firefighters
 Date of termination _____

Print legibly; answer all questions completely and accurately. Attach supplemental sheets as needed.

Last Name: _____ First Name: _____ Birth Date: _____

Mailing Address: _____ City: _____ Zip: _____

Best Contact Phone: _____ Email: _____

1. List all traffic citations for the last three years: _____

2. Do you possess a current valid Washington Drivers license? YES NO
 Drivers License No.: _____ Expiration Date: _____

3. Have you ever been accused or convicted of any crimes? YES NO
 If Yes, please explain *in separate letter*.

4. Do you agree to let Snohomish County Fire District #5 run a background check on you? YES NO

5. Do you reside in Snohomish County Fire District #5? YES NO How Long? _____

6. List three professional references, not related to you:

Name	Address	Phone	Relationship

7. Were you previously employed by this department? YES NO, If yes, Dates: _____

8. Do you have any relative(s) currently employed by this department? YES NO
 If Yes, Name/Relationship: _____

9. Will Visa or Immigration status prevent lawful employment? YES NO

10. Do you have any handicaps, hearing loss, allergies or health conditions that may affect your ability to perform the job applied for, or which you would like the department to consider in determining your job placement?. YES NO
 If yes, explain: _____

Education History

School Name	City, State	From / To	Degree / Major	Graduated
High School / GED		/		<input type="checkbox"/> Yes <input type="checkbox"/> No

College		/		<input type="checkbox"/> Yes <input type="checkbox"/> No
College		/		<input type="checkbox"/> Yes <input type="checkbox"/> No
Other		/		<input type="checkbox"/> Yes <input type="checkbox"/> No
EMS / Fire Training		/		<input type="checkbox"/> Yes <input type="checkbox"/> No
EMS / Fire Training		/		<input type="checkbox"/> Yes <input type="checkbox"/> No

Employment History

Starting with present or most recent, list current and last 2 previous employers. Include self-employment and summer or part time jobs. If more space is required, please continue on a separate sheet.

Last or present employer		/	From / To		Phone Number	
Address		/	City		State	Zip Code
Job Title:	Description of Duties:					
Supervisor's Name:						
Supervisor's Phone:						
Reason for Leaving:						
Last or present employer		/	From / To		Phone Number	
Address		/	City		State	Zip Code
Job Title:	Description of Duties:					
Supervisor's Name:						
Supervisor's Phone:						
Reason for Leaving:						
Last or present employer		/	From / To		Phone Number	
Address		/	City		State	Zip Code
Job Title:	Description of Duties:					
Supervisor's Name:						
Supervisor's Phone:						
Reason for Leaving:						

Military History _____ Branch of Service _____ From _____ To _____

Present Military Affiliation None Active Reserves Inactive Reserves

I HEREBY CERTIFY THAT THE ANSWERS AND OTHER INFORMATION GIVEN IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT ANY MISREPRESENTATION OR OMISSION OF FACTS IN THIS APPLICATION IS CAUSE FOR CANCELLATION AND/OR DISMISSAL FROM THE FIRE DISTRICT. I UNDERSTAND THAT MY EMPLOYMENT MAY BE CONTINGENT UPON RECEIPT OF AN ALIEN REGISTRATION NUMBER, VERIFICATION OF BIRTH, AND ANY OTHER PERTINENT INFORMATION BEARING UPON MY EMPLOYMENT AND MY CONTINUED EMPLOYMENT DEPENDS UPON THE WILL OF THE DEPARTMENT OR MYSELF.

Applicant Signature _____

Date _____

An Equal Opportunity Employer

Snohomish County Fire District #5 is an equal opportunity employer, and we do not and will not discriminate on the basis of race, religion, national origin, sex, age, handicap, marital status, or status as a disabled veteran or Vietnam-era veteran. Information provided on this application will be not used for any discriminatory purpose.