

Employment

Current Occupation: _____

Please list employers, starting with the most recent:

Company: _____ Years Employed: _____

Position: _____ Address: _____

Phone: _____

Company: _____ Years Employed: _____

Position: _____ Address: _____

Phone: _____

Company: _____ Years Employed: _____

Position: _____ Address: _____

Phone: _____

Personal References

Please provide three character references we may contact (do not include relatives).

Name: _____ Address: _____

Phone #: _____ Occupation: _____ Relationship: _____

Name: _____ Address: _____

Phone #: _____ Occupation: _____ Relationship: _____

Name: _____ Address: _____

Phone #: _____ Occupation: _____ Relationship: _____

Contact Information in case of Emergency

Name: _____ Address: _____

Phone #: _____ Relationship: _____

Name: _____ Address: _____

Phone #: _____ Relationship: _____

Do you have any previous firefighting or rescue experience? YES / NO

If yes, please fill in the information below. Include copies of any training certificates you have received when turning in your application.

Fire Department: _____

Address: _____

Contact: _____ Phone #: _____

Please list any relevant training or experience you possess that you feel would be beneficial to the Brigade (ie: first aid, MFR, Level 1 FF, Air Brake certified, etc):

Please list any areas of interest, expertise, skills or abilities that you possess which you feel would be beneficial to the Brigade:

Onslow Belmont Fire Brigade offers opportunities for members to participate in committees and activities apart from our regular trainings and meetings. Each committee consists of several members and is specific to a particular function of the Brigade. Please indicate which, if any, of the following committees and/or activities might be of interest to you:

- Building:** responsible for the maintenance and repairs to the fire hall structure.
- Police:** policing and traffic control at scenes as well as public functions.
- Training:** responsible to coordinate and arrange all firefighter training for the Brigade.
- Clothing:** coordinates the purchase or all brigade clothing, bunker gear, helmets, etc.
- Accountability:** responsible for emergency scene safety.
- Fire Prevention:** promotes fire safety throughout the local community, schools, etc.
- Secretary:** maintains records of Brigade meetings as well as correspondence and mailings.
- Treasurer:** accountable for all Brigade funds, bank accounts, budget, etc.
- Equipment:** responsible for maintenance of fire trucks and miscellaneous equipment in the hall.
- Membership:** recruiting, anniversaries and recommendation of new members.
- Radios and Alarms:** this committee looks after all pagers, radios and communication equipment.
- Steward:** organizes Brigade social activities and supplies food and beverages for major emergencies.
- Sports:** organises various sport activities in house and throughout the Maritimes ie: baseball, curling, darts, bowling and golf.
- Sick and Visiting:** provides cards, flowers, etc to members or family members with sickness or death.
- Publicity:** publishes Brigade news letter, corresponds with radio, newspaper, etc.
- Medical First Response:** maintains medical supplies and coordinates training. Liaison with EHS.
- Boat:** maintenance and upkeep of the Zodiac and associated equipment.
- SCBA:** maintains air pump, equipment and records associated with our self contained breathing apparatus.

Statement of Understandings and Authorizations

I hereby apply for membership in the Onslow Belmont Fire Brigade (the Brigade) and, if accepted for membership, I will comply with the constitution, by-laws, rules, standard operating guidelines and the conduct expected of Brigade members. I authorize the Brigade to investigate the statements made in this application and I understand that an investigation of these statements may be made, including but not limited to, a criminal record check. I understand that omitting or falsifying information in this application or any subsequent interview connected with this application may result in denial of membership or expulsion from the Brigade.

I hereby authorize the Brigade to contact the persons, organizations and companies listed above for the purpose of obtaining reference information, including information contained in my personnel file. These persons are authorized to disclose such information.

Signature of Applicant: _____

Printed Name: _____

Date: _____

Do not write below this line

Membership Committee Processing Record

Date application was received: _____

Date of interview: _____

Date Record Checks are completed: _____

Presented to Membership: YES / No

Date of Membership vote:

1) Probationary: _____

2) Regular: _____