



SCHONOWE VOLUNTEER FIRE CO. INC.
112 GORDON ROAD
SCHENECTADY, NEW YORK 12306

Application for: Firefighter Fire Police Social Member Re-instatement

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

Date of Application: ___/___/___ **Date of Birth:** ___/___/___ **Social Security #:** ___-___-___

Name: _____
 (Last) (First) (Middle)

Address: _____ City: _____ State: _____ Zip: _____

Previous:
 Address: _____ City: _____ State: _____ Zip: _____

Phone #: _____
 (Home) (Work) (Cell)

Are you a citizen of the United States? Yes ___ No ___
 If not do you posses an Alien Registration Card? Yes ___ No ___
 Have you previously filed an application with this organization? Yes ___ No ___
 Do you have any friends or relatives who are presently a member of this organization? Yes ___ No ___
 Have you any firefighting experience? Yes ___ No ___
 If yes list names, courses, and proof of course completion.

Have you ever been convicted of a misdemeanor or felony? Yes ___ No ___
 Have you ever been convicted of an arson-related crime? Yes ___ No ___
 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 you job performance as a volunteer? Yes ___ No ___

If necessary please explain:

Are you presently a member of any other civic organization? Yes ___ No ___
 If yes please list:

Please give name, address and phone number for (3) references, not related to you.

Education: Years completed: _____ Diploma / Degree _____
 Specialized training, skills: _____

Employment: (List all the places of employment for the past three years. Most current first).

Name: _____ Address: _____

Name: _____ Address: _____

Name: _____ Address: _____

Driver information: State license issued in: _____ License Number: _____

Name of Insurance Carrier: _____

Availability for Membership: Day time worker: ____ Night Time worker: ____ (Hours ____ to ____)

Are you able to attend evening drills? Yes ____ No ____

Are you able to attend evening meeting? Yes ____ No ____

If no please explain:

Applicant's Authorization for Release of Information:

In order to confirm the information I supplied on this application for membership with the Schonowe Volunteer Fire Company, I authorize all licensing agencies, educational institutions, law enforcement agencies, neighbors, insurance carriers, the NYS Department of Motor Vehicles, present and former employers, and the military services to disclose their relevant records about me to the Schonowe Volunteer Fire Company whether the information be of public, private or confidential nature; and I release them from any liability and responsibility from doing so.

This authorization, in original copy form, shall be valid for this and any future information, reports, or updates that may be requested. I understand that this form will accompany requests for official documents and confirmations of my credentials.

Signature of Applicant: _____ Date: ____/____/____

Witnessed by: _____ Date: ____/____/____

Recommended for membership by: _____

Privacy Notification:

Section 94 of the Public Officers Law (Personal Privacy Protection Law) requires that you be notified of the following facts when information which will be maintained in a record system is collected from you. The authority to request and confirm personal information about you is found in Article 6 of the Executive Law.

The information obtained will:

- Be used to determine your qualifications for the position for which you are applying
- Be released to the Fire Chief and your potential supervisors
- Be maintained in your personal file (if you become a fire company member) or in our resume file for six months (if you are not a fire company member).

Failure to provide the information or authorization will result in your application not being considered for membership.

The information will be maintained by the Board of Fire Commissioners of the Rotterdam Fire District #7 at 112 Gordon Road, Schenectady, N.Y. 12306

Department approvals:	Date:	INITIAL:
Investigating committee recommendations: Approve: ____ Reject: ____	____/____/____	_____
Approved for membership by vote of the Fire Company on:	____/____/____	_____
Approved for membership sent by the Board of Fire Commissioners on:	____/____/____	_____
Officer of firematic equipment distribution notified on:	____/____/____	_____
Officer in charge of uniform equipment and badge distribution notified on:	____/____/____	_____
Commissioners of Radio's Equipment distributions notified on:	____/____/____	_____
Commissioners of Building Security and Key Distribution notified on:	____/____/____	_____