## **Application Agreement**

obtain a criminal background check, record deemed necessary by the Chic	agree to allow the West Iredell Fire Department to driving history report, and any other personnel ef. I agree to random drug testing during my he Chief of any and all changes that might occur in
I agree to abide by all policies and re	quirements of the West Iredell Fire Department.
0 1	eks during which time no day, night, or medical me unless approved by the Chief or another officer. plinary action up to termination.
than one year at the end of which the performance and decide membership probationary period for no less then (90 days) if he feels that I have not no	ng period I will be on a probationary period of no less New Membership Committee will review my estatus. The Chief reserves the right to extend the one month (30 days) and no more than three months net all requirements. After the second probationary will be conducted. If I still haven't met all minate my membership.
Applicants signature:	Date:
Chiefs signature:	Date:

## WEST IREDELL FIRE DEPARTMENT

2136 Old Mountain Rd. Statesville NC 28625

Phone- 704-872-3947 Fax- 704-872-7658

## **APPLICATION FOR MEMBERSHIP**

Name: La	st:	First:	Midd	lle:
Sex:	Race:	Date of Birt	h: Phone	e:
Social Sec	urity Number;			
Address: _		City:		Zip:
Email Add	lress:			
Marital Sta	atus:	Spouse Na	me:	
Children's	Name:			
Do you ha	ve a valid NC dri	vers' license?	NCDL#	Class
High Scho	ol Diploma? Yes	No G	ED? Attendir	ng School
Employer:		Fu	ll Time or Part Time	e:
Address: _		City:		Zip:
Work Hou	rs:	Superv	visor's Name:	
Insurance	Carrier:		Policy Number: _	
			Hospital Preferen	ce:
•		•	0	tations? If yes,

•	' History Report at any time	perform a Criminal Background e during your membership with the	•
Do you agree to submit to	a drug test at any time durin	ng your membership?	-
Do you agree to complete a	a minimum of 36 training h	ours per year?	
Do you agree to abide by the	he SOG's of West Iredell Fi	ire Department?	
If yes, what is the name of Reason you are no longer a Where you recommended to	that organization?a member of that organization for membership by a curren	rescue squad? on? t member or employee tate whom	
Please list three personal re	-	Relationship:	
		<u>-</u>	
application is true and curr	s application, I have stated tent. I understand that falsifes for termination of this app		is
NAME		DATE	_

All applicants will be reviewed by the Chief and command staff. An interview will be offered depending on whether or not there are any current openings within the department. If we decide to turn your application down you will be contacted by letter explaining the reason for decline. Thank you for your interest in joining West Iredell Volunteer Fire Department.