



VOLUNTEER FIRE FIGHTER APPLICATION

PERSONAL INFORMATION

Name: _____

Physical Address: _____

Mailing Address: _____

City

State

Zip

E-Mail Address: _____

Work & Home Phone: _____ | _____

Date of Birth: _____ Age: _____

Name of Spouse: _____

Number of Children: _____

Do you have the legal right to work in the United States No Yes

Social Security No. : _____

Drivers License No. : _____

State

Expires

If Commercial, state type with endorsements

WORK HISTORY

Current Employer: _____

Title/Position

Length of time at job

Previous Employer: _____

Title/Position

Length of time at job

EDUCATION AND TRAINING

HIGH SCHOOL

Do you have a high school diploma? No Yes

School Name: _____

Location: _____

If "No" do you have a GED certificate? No Yes

If "No" Indicate highest grade completed: _____

COLLEGE OR UNIVERSITY

Name of last College attended: _____

Date last attended: _____ Did you graduate? No Yes

Major: _____ Minor: _____

Select highest year completed: 13 14 15 16 17 18 19 20

What degree did you receive? Associates Bachelors Masters

Do you speak a foreign language? No Yes

If yes, please list the language(s) you are fluent in:

List any other valid licenses and certificates you hold:

Type of License/Certificate Issuing State Registration No. Expiration Date

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REFERENCES

NAME RELATION PHONE

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If my application is accepted by the City of Wendover Fire Department I agree to abide by all the rules and regulations so adapted the City of Wendover, Utah. The Wendover Mayor and City Council reserves the right to refuse any application.

Signature of Applicant

Date

Accepted

Date

Officer in Charge