

**Emmitsburg, Maryland
Vigilant Hose
Volunteer Fire Department
P.O Box 171
Emmitsburg, Maryland 21727
301-447-2728**

APPLICATION FOR MEMBERSHIP

Position Applying for: ☐ Active Operational ☐ Administrative Member ☐ Auxiliary Member ☐ Social Member

Last Name: _____ **First Name:** _____ **Middle Initial:** _____

Address: _____ **Home Phone:** _____

_____ **Work Phone:** _____

Email Address: _____ **Mobile Phone:** _____

Driver's License Number: _____ **Date Of Birth:** _____

In Case of Emergency Please Notify: _____

Address: _____

Home Phone #: _____ **Work Phone #:** _____ **Other:** _____

Doctor's Name: _____ **Phone Number:** _____

High School: _____ **Address:** _____

Highest Grade Completed: _____ **Date Graduated:** _____ **Date of GED:** _____

College Attended: _____ **Degree Earned:** _____

Address: _____ **Credits Earned:** _____

Current Employer: _____ **Position Held:** _____

Address: _____

Telephone #: _____ **Dates Employed: From** _____ **to** _____

Previous Employer: _____ **Position Held:** _____

Telephone #: _____ **Dates Employed: From:** _____ **to** _____

1. **References:** List 3 character references whom you have known for at least 3 years and who are not related to you. The references may not be past employers.

a. **Name:** _____ **Phone #:** _____

Address: _____

b. **Name:** _____ **Phone #:** _____

Address: _____

c. **Name:** _____ **Phone #:** _____

Address: _____

2. **Have you ever been a member of Vigilant Hose Co. before?** [] Yes [] No **If Yes, Date:** _____

3. **Has your driver's license ever been suspended/revoked?** [] Yes [] No **If yes, explain circumstances, give dates of suspension and reinstatement:**

IF FILING FOR ACTIVE FIREFIGHTER POSITION, COMPLETE QUESTIONS 4-7, OTHERWISE SIGN BELOW.

4. **Have you ever served in another Fire Department?** [] Yes [] No **If yes, Date:** _____

Name of Department: _____

Address: _____

Telephone #: _____ **Date of Service:** _____

Name of Current Chief: _____

Current Chief's Recommendation: _____

List the types of Fire/Rescue vehicles you have been authorized to drive:

a. _____ b. _____ c. _____ d. _____

State the highest Rank you held: _____

5. List any Fire/Rescue/EMS or related courses you have taken and where/how obtained. *Attach a copy of any certificates earned.*

a. _____

b. _____

c. _____

6. In a brief statement, please explain why you want to become a member of the Vigilant Hose Fire Department.

7. Have you ever been convicted of a criminal offense in adult court? [] Yes [] No If yes, give details, including charge, location, and disposition of case.

I, the undersigned, certify that I have read and fully understand this form in its entirety and that the information herein is true and complete to the best of my knowledge. I authorize the investigation of all statements made herein. I understand that should any statement I have made prove to be false, misleading or erroneous, it may result in the rejection of my application or in my discharge from the Vigilant Hose Company. I also agree to uphold the rules, regulations and Bylaws of the Vigilant Hose Company.

I hereby authorize a police record check to be conducted as per Article 38A, of the annotated Code Of Maryland. If elected to membership, *I agree to provide a certified copy of my driving record from the Motor Vehicle Administration at my own expense.*

Upon resignation of my membership, I agree to return all items issued by the Department including but not limited to protective gear and any other items entrusted to me.

Applicant's Signature: _____ Date: _____