

**APPLICATION FOR MEMBERSHIP
TO
PENN YAN FIRE DEPARTMENT**

**125 ELM STREET
PENN YAN, NEW YORK 14527**

APPLICATION

THROUGH _____ **COMPANY**
(Ellsworth Hose, Hydrant Hose, Sheldon Hose, or Hunter Hook & Ladder)

Date _____

1. _____
(Last Name) (First Name) (M.I.)

2. _____
(Address) (Apt. /Suite No.)

3. _____
(City, Town, Village) (State) (Zip Code)

4. Telephone: (____) ____-____ (____) ____-____ (____) ____-____
(Home) (Work) (Cell)

5. How long have you resided at the above address? Years: ____ Months: ____

6. How long have you resided in New York State? Years: ____ Months: ____

7. Age: ____ Date of birth: _____ U.S. Citizen: Yes ___ No ___

8. SSN: _____

9. Is additional information about a change in your name or your use of an assumed name or nickname necessary to enable a check on your eligibility for membership? Yes ___ No ___ If "Yes", explain.

10. Are you currently employed? Yes _____ No _____
If "Yes", give employer information below. May we contact your employer as a reference? Yes _____ No _____

Name of Company _____

Address _____

Supervisor Name _____ Telephone No. (____) ____ - _____

11. Do you have a valid New York State Driver's License? Yes ___ No ___ Class _____

12. Please indicate your availability to participate in normally required fire department activities (meetings, drills and emergency calls).

Please check appropriate time periods.

Week Days:

Days _____ Evenings _____ Nights _____

Weekends:

Days _____ Evenings _____ Nights _____

13. Previous emergency services experience: (include only fire, rescue, police, and emergency medical service agencies).

Name of Agency: _____

Address: _____

Contact Person: _____ Telephone No.() ____ - _____

14. Have you ever been a member of the United States Armed Forces? Yes ___ No ___

If the answer is "Yes", did you receive a dishonorable discharge? Yes ___ No ___

(Dishonorable discharge is not an absolute bar to membership. This and other factors will effect a final membership decision).

If answer is "Yes" to Dishonorable Discharge, give complete details including service branch and service dates on separate sheet and attach to this application.

15 Have you ever been convicted or pled guilty to a felony, misdemeanor, insurance fraud, arson, or a reduction of one of these offenses? Yes___ No___
If "Yes", give complete details on separate sheet and attach to this application.

16 Please list three personal references, (**other than members of this organization**), who have known you for at least 3 years.

A. Name: _____ Telephone No. () ____ - ____

Address: _____

B. Name: _____ Telephone No. () ____ - ____

Address: _____

C. Name: _____ Telephone No. () ____ - ____

Address: _____

17 Please list the names of any acquaintances that **ARE** members of this organization:

18 OSHA regulations require that you pass a physical examination before becoming an interior structural firefighter. The department's designated physician will provide you with a free medical examination. Will you be willing to undergo a medical examination? Yes:___ No:___

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APPLICANT'S AUTHORIZATION FOR RELEASE OF INFORMATION

In order to confirm the information I supplied on my application for membership with the Penn Yan Fire Department, I authorize all licensing agencies, educational institutions, law enforcement agencies, present and former employers, and the military services to disclose their relevant records about me to the Penn Yan Fire Department 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.

Applicant Name (Please Print) Applicant's Signature Date

Witnessed by:

Name and Title (Please Print) Signature Date

WITHIN THE FREEDOM OF INFORMATION LAW, ALL INFORMATION CONTAINED/ OR OBTAINED HEREIN WILL REMAIN CONFIDENTIAL AND WILL BE USED ONLY FOR INTERNAL MEMBERSHIP PROCESSING

IN WITNESS WHEREOF, THIS APPLICATION HAS BEEN
SUBSCRIBED THIS _____ DAY OF _____, 20____
BY THE UNDERSIGNED APPLICANT WHO AFFIRMS THAT THE
STATEMENTS MADE HEREIN ARE TRUE UNDER THE PENALTIES OF
PERJURY.

APPLICANT SIGNATURE _____

DATE _____

WITNESSED BY _____

DATE _____

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 on 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; and
- be maintained in your personnel file (if you become a fire department member).

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

This information will be maintained by the Fire Chief of the Penn Yan Fire Department at 125 Elm Street in the Village of Penn Yan, New York 14527.
315-536-6111