

FERNDALE VOLUNTEER FIRE COMPANY APPLICATION

Date of application: _____

Why do you want to be a volunteer at Ferndale?

References:

Name	Relationship to You	Contact Phone

Verification and Consent for Reference and Background Check:

I verify that, to the best of my knowledge, the information provided in this application is accurate.

I give [name of jurisdiction/agency] permission to inquire into my educational background, references, licenses, police records, and employment and/or volunteer history. I also give permission to the holder of any such information to release it to [name of jurisdiction/agency].

I hold [name of jurisdiction/agency] harmless of any liability, criminal or civil, that may arise as a result of the release of this information about me. I also hold harmless any individual or organization that provides information to the above-named [jurisdiction/agency]. I understand that [jurisdiction/agency] will use this information only as part of its verification of my volunteer application and will not provide the information herein to any external individual or organization.

Name (please print)

Social Security Number

Signature

Date

Witness

Date

Membership Committee:

Date Interview Conducted: _____ **By:** _____

Prior Fire Company Membership: YES NO **Anne Arundel County Badge Number:** _____

Recommendation for Membership: _____

Membership Approval: YES NO

Date Application Accepted by Membership: _____