

CITY OF HEATH, DIVISION OF FIRE

VOLUNTEER MEMBERSHIP APPLICATION



APPLICANT NAME

Return Completed Application to:

193 Heath Road

Heath, OH 43056

(740) 522-4585

ADMINISTRATIVE USE ONLY
DATE OUT: _____
DATE RECEIVED: _____
DATE PROBATE MEMBER: _____
DATE PERMANENT MEMBER: _____
DRIVERS ABSTRACT: _____
BACKGROUND CHECK: _____

**CITY OF HEATH, DIVISION OF FIRE
193 HEATH RD, HEATH, OH 43056
VOLUNTEER MEMBERSHIP APPLICATION**

Print clearly and answer all questions.
Attach supplemental pages if necessary.

Name: _____			
Last	First	Middle Initial	
Have you ever been known under any other name: Yes <input type="checkbox"/> No <input type="checkbox"/> Other name: _____			
Address: _____			
Street	City	State	Zip Code
Telephone Number: _____			
	Home	Cell	
SSN: ____-____-____	Drivers License #: _____	Email: _____	
License Class: _____	State: _____	CDL: _____	Exp: _____
Birthdate: _____ (MM/DD/YY)			
Have you worked for the City of Heath, Division of Fire before?		Yes: <input type="checkbox"/> When? _____	No: <input type="checkbox"/>
Are you a United States citizen? Yes: <input type="checkbox"/> No: <input type="checkbox"/>			
Do you have legal authorization to work in the United States? Yes: <input type="checkbox"/> No: <input type="checkbox"/>			

Emergency Contact

Name: _____ Relationship: _____

Address: _____

Telephone Number: _____

Home Cell

Have you been convicted of any crime, including any traffic violations that are charged as felony, within the past ten (10) years? Yes: No:

If yes, please explain: _____

Criminal convictions are not necessarily a bar to employment; each case will be reviewed on an individual basis.

Military Service Information

Branch: _____ Type of Separation: _____
Served from: _____ Served to: _____
Highest Rank Achieved: _____ Job Title: _____
Duties: _____ Reserve/National Guard Status: _____

An individual's past, present, or future uniformed service duty or obligation will not be a negative factor in any hiring decision. This includes members of the Reserve and National Guard, veterans, and those who report for enlistment or entry testing.

Employment History

Begin with PRESENT position or occupation. Account for all times in the past ten (10) years, including periods of unemployment. In addition, list any qualifying experience prior to last 10 years. If additional room is needed, use a separate sheet of paper. A resume is allowed if needed. It will become an official part of this application.

Employer Name & Telephone Number: _____

Address: _____

Street City State Zip

Supervisor's Name: _____ Job Title: _____

Date from: _____ Date to: _____ May we contact? Yes: No:

Duties: _____

Reason for Leaving: _____

Employer Name & Telephone Number: _____

Address: _____

Street City State Zip

Supervisor's Name: _____ Job Title: _____

Date from: _____ Date to: _____ May we contact? Yes: No:

Duties: _____

Reason for Leaving: _____

Employer Name & Telephone Number: _____

Address: _____

Street City State Zip

Supervisor's Name: _____ Job Title: _____

Date from: _____ Date to: _____ May we contact? Yes: No:

Duties: _____

Reason for Leaving: _____

Employer Name & Telephone Number: _____

Address: _____

Street City State Zip

Supervisor's Name: _____ Job Title: _____

Date from: _____ Date to: _____ May we contact? Yes: No:

Duties: _____

Reason for Leaving: _____

Employer Name & Telephone Number: _____

Address: _____

Street City State Zip

Supervisor's Name: _____ Job Title: _____

Date from: _____ Date to: _____ May we contact? Yes: No:

Duties: _____

Reason for Leaving: _____

Education

High School: _____

Address: _____

Street City State Zip
Did you graduate? Yes: No: Graduation Year: _____ GED? Yes: No:

Course of Study: _____ *Attach copy of H.S. Diploma or Certification of Equivalent to application.*

College: _____

Address: _____

Street City State Zip
Did you graduate? Yes: No: Date from: _____ Date to: _____

Course of Study: _____ Type of Degree: _____

Technical School: _____

Address: _____

Street City State Zip
Did you graduate? Yes: No: Date from: _____ Date to: _____

Course of Study: _____

References

Do not use relatives or past employers listed previously. These people should be able to speak to your qualifications for employment with the City of Heath, Division of Fire

Name Address Telephone Number

Name Address Telephone Number

Name Address Telephone Number

Please explain any addition knowledge, skills, or abilities not previously discussed which may be of qualifying nature or helpful to you in establishing your eligibility for employment. Include projects, hobbies, community or volunteer activities, etc. Exclude those that would indicate race, color, religion, or national origin.

Certification

Type of Certification	Certification Number	Expiration Date

Read the following statement before signing this application:

- A. I understand that this is an application and is not intended to be a contract of employment. I also understand that this application does not obligate the City of Heath, Division of Fire in any way should the City of Heath, Division of Fire to employ me.
- B. I understand and agree that the City of Heath, Division of Fire, its authorized representative, agent, or employee may take a thorough investigation of my past employment and activities. This may include, but is not limited to, a motor vehicle operator's license record check, a criminal background check, as well as a verification of past employment and qualifications. I authorize any law enforcement agency, previous employers or educational institutions specified by me in this application to release any and all information, personal or otherwise, that may or may not be on their records to the City of Heath, Division of Fire I release all law enforcement agencies, previous employers and educational institutions from any and all liability to me arising out of the release of such information.
- C. I hereby release the City of Heath, Division of Fire, its agents, and employees from any and all liability or damages, which may result from exchange of all information requested pursuant to this application. I certify that all statements contained herein or provided to the City of Heath, Division of Fire in response to this application for employment are true and complete to the best of my knowledge. I understand that a false answer or material omission may be grounds for immediate dismissal from employment with the City of Heath, Division of Fire regardless of when the information is discovered.
- D. The City of Heath, Division of Fire is an equal opportunity/affirmative action employer/drug free workplace.

Applicant Signature

Date

Please attach a copy of a state or federal background check, drivers abstract, certifications, and driver's license to this application.

**CITY OF HEATH, DIVISION OF FIRE
193 HEATH RD, HEATH, OH 43056
VOLUNTEER MEMBERSHIP APPLICATION CHECKLIST**

Copy of state issued Fire/EMS certification

Copy of DD Form 214 (Military Only)

Copy of Drivers Abstract

<https://ext.dps.state.oh.us/BMVOnlineServices.Public/DLVerification.aspx?>

Copy of BCI or FBI background check

Can be obtained at:

Licking County Sherriff's Office

Newark Police Department

Heath Police Department

Copy of Driver's License

Please keep this page for your reference. Do not submit this page with the completed application.

This checklist and application must be completed prior to returning application.



BCI/FBI Background Checks for all Applicants

Please note you will need a state issued ID and payment as noted below unless otherwise stated. You should have your BCI and or FBI results mailed to you and Heath Fire Dept. (Attention to the Fire Chief). *Exception would be state application requiring results be submitted directly to an agency. Example: State Medical Board Application.

We have listed below the local institutions that do fingerprints for both BCI and FBI **(be sure to have your driver's license with you):**

Licking County Educational Services – 145 N. Quentin, Newark - BCI & FBI Background Check 740-349-6084 or 349-6087 Monday through Friday Closed Holidays	(located on the 3rd floor) Hours: 9:00 a.m. to 11:00 a.m. (Appointment Only) 1:00 p.m. to 3:30 p.m. (Walk-ins)	\$65 (BCI & FBI) \$35 (BCI only) \$35 (FBI only) Cash, Check, or Money Order ONLY.
Newark Police Department - 59 South Fourth Street, Newark - BCI & FBI Background Checks 740-670-7200	Hours: 8 a.m. to 3:30 p.m. (located in the receptionist area)	\$25 (BCI Only) \$60 (BCI & FBI) CASH ONLY
Licking County Sheriff's Office - 155 East Main Street, Newark - BCI & FBI Background Checks 740-670-5508	Hours: Wed & Thurs 12:00 p.m. to 3:45 p.m.	\$60 (both BCI & FBI) \$30 (BCI only) \$30 (FBI only) Call for payment options.
COTC -1179 University Drive, Newark –BCI & FBI Background Checks 740-366-9237	Hours: Mon-Fri 9 a.m. to 5 p.m. 1) Pay fee at the Gateway in Hopewell Hall 2) Take paid receipt to the Security Department located in the Warner Center.	\$60 (both BCI & FBI) \$25 (BCI only) \$35 (FBI only) Call for payment options.

PRICES ARE SUBJECT TO CHANGE FOR ANY OF THESE LOCATIONS.

If you choose a different location other than the above listings, please call ahead to make sure the location does both BCI and FBI checks.
