

California Volunteer Fire Department

Application for Student Membership

Name: _____ Date: _____

Date of Birth: _____ Age: _____ SSN #: _____

School Address: _____

Home Address: _____

School Phone: (_____) _____ - _____ Home Phone: (_____) _____ - _____

Physical Condition: _____ Any Medical Problems: YES _____ NO _____

If yes, explain: _____

Name of Home Department: _____

Fire Chief's Name: _____ Phone: (_____) _____ - _____

Training Officer's Name: _____ Phone: (_____) _____ - _____

What Year at Cal. U.: _____ Expected to graduate in the _____ semester of _____

Time in Fire Service: _____

Ever been convicted of a felony: YES _____ NO _____ If YES, explain: _____

I attest that I have never been convicted of an offense that constitutes the crime of "arson and related offenses" under 18 Pa.C.S § 3301 or any similar offense under any Federal or state law. I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein, I am subject to penalties prescribed by law, including, but not limited to, a fine of at least \$1,000.

I attest that all information is true, and I also understand that the Board of Directors will make contact with my Chief and Training Officer of my home Fire Department. I understand that any false information provided on this application will result in immediate disqualification of membership, along with the right to apply in the future to the California Volunteer Fire Department. Also, by signing this application, I authorize the California Volunteer Fire Department to conduct a Criminal History Background Check.

Signature: _____

Date: _____