



North Saanich Volunteer Fire Department

Volunteer Firefighter Application 2021

Personal Information:

First Name: _____ Last Name: _____

Address: _____
Number Street Postal Code

Do you: Own Rent Board Live with parents

Birthdate: _____ Age: _____
MM / DD / YY

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email Address: _____

Emergency Contact Name: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Single Married Spouses Name: _____

Dependents (if any), please list below:

Name: _____ Birthdate: _____ Relationship: _____

Name: _____ Birthdate: _____ Relationship: _____

Name: _____ Birthdate: _____ Relationship: _____

Employment Information:

Do you have your employer's consent to attend calls during work hours? Yes No

Present Employer: _____ Phone Number: _____

Address: _____ Position: _____

Employment Information Continued:

How long have you been employed at present workplace? _____

Normal hours of work: _____ Days Afternoons Evenings

Shift worker: Yes No Regular days off: _____

Assessment Questions:

Do you have a valid driver's licence? Yes No

Class: _____ Licence Number: _____ Air: _____

Restrictions (if any): _____ Expiry Date: _____

Have you ever had your driver's licence suspended? Yes No

If yes, explain: _____

Do you have any previous firefighting experience? Yes No

If yes, describe: _____

Do you have a valid First Aid Certificate? Yes No

Are you in good health? Yes No

Family Physician: _____ Date of last medical: _____

Height: _____ Weight: _____ Medical number: _____

Blood type, if known: _____ Allergies: _____

Are you claustrophobic? Yes No

Are you afraid of heights? Yes No

Have you ever been convicted of a criminal offence? Yes No

If YES, briefly state the particulars: _____

Would you grant the District permission to conduct a criminal record search? Yes No

General Questions:

How did you hear about the North Saanich Volunteer Fire Department?

NSFD Firefighter Website Newspaper Recruitment Advertising Other: _____

State briefly the reasons for wanting to become a volunteer firefighter : _____

What skills, education, experience, relevant to firefighting do you have?

Character References:

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

To the best of my knowledge, the information contained on this form is true and accurate.

Applicant's Signature

Date

Office Use Only:

Date application received: _____ Received by: _____

Comments: _____

Application: Accepted Rejected Date: _____

Approved by Fire Chief: _____ Date: _____