

Bloomsburg Fire Department

911 Market Street, Bloomsburg, PA 17815

APPLICATION FOR MEASUREMENT

1. Complete the entire application. (Must be 18 years old to apply.)
2. Attach:
 - a.) Pennsylvania State Police background check form
 - b.) Check made out to the Bloomsburg Fire Department for \$10 (\$5 application non-refundable fee and \$5 dues for the first year.)
 - c.) Any copies of any fire/hazmat training already completed.
3. Hand-deliver to the company meeting, 3rd Tuesday of every month OR mail to above address.

Check only one membership category which you are applying:

Firefighter Fire Police Firefighter AND Fire Police Social Member

Last Name _____ First name _____ MI _____ Date of birth ____/____/____

Height _____ Weight _____ Personal Phone _____ e-mail _____

Social Security Number _____-_____-_____ Driver's License # _____ State _____

Current Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Employer _____ Work Phone _____

Emergency Contact Information: Name _____ Phone _____

Address _____
Street City State Zip

Have you ever been:

a.) a member of any other fire department? Yes No (If "Yes," what department _____)

a.) suspended from any other fire department? Yes No (If "Yes," what department _____)

I, hereby, certify that all of the information is true and correct. Failure to provide true and accurate information will result in immediate rejection or suspension.

Signature

Date

-----DEPARTMENT USE ONLY-----

1. Signature of proposing, non-probationary member . _____

2. Signature of officer acknowledging receipt of \$10 check/training/police check. _____

3. Date received _____ read at meeting _____ voted on _____ [Approved Rejected

Members of Investigating Committee:	Signatures	Approved	Rejected
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1.	_____	_____	_____
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2.	_____	_____	_____
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3.	_____	_____	_____
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