

CENTRE HASTINGS FIRE DEPARTMENT

P. O. Box 900, 7 Furnace Street Madoc Ontario K0K 2K0

Phone: (613) 473-4030



VOLUNTEER APPLICATION FORM

Centre Hastings Fire Department welcomes volunteers of all ethnic backgrounds and varied skills (ages 18 & older for Fire Fighting and Emergency First Responders). Volunteer applicants are evaluated on the merits of their qualifications and are subject to background & drivers license checks . Please mail the completed application to the address listed above or drop off at the municipal office.

NAME: _____
Last First Middle

ADDRESS: _____
Street Apartment

City Province Postal Code

PHONE: _____
Home Work

New Volunteer Y N Returning Volunteer Y N Last Served _____

In Case of Emergency Contact:

NAME: _____
Last First Phone

If the volunteer is under age 18, the parent or guardian must sign below to acknowledge their consent to volunteer participating in this program.

Signature Relationship Age of Minor

LAST NAME:

FIRST NAME:

DATE

MILITARY SERVICE: _____ <hr/> <div style="display: flex; justify-content: space-between;"> <i>Branch</i> <i>Years of Service</i> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <i>Acquired Skills</i> <i>Last Year of Service</i> </div>	MILITARY SERVICE												
PRESENT EMPLOYER: _____ <hr/> <div style="display: flex; justify-content: space-between;"> <i>Position</i> <i>Typical Work Day Hours</i> <i>Phone</i> </div> <p>IF RETIRED OR FORMERLY EMPLOYED:</p> <p>List two employment positions which you have held that you enjoyed the most. In the last column, answer Y- yes or N-no if you would like to do something similar as a volunteer,</p> <hr/> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%; text-align: center;"><i>Position</i></th> <th style="width: 33%; text-align: center;"><i>Company</i></th> <th style="width: 15%; text-align: center;"><i># of Years</i></th> <th style="width: 19%; text-align: center;"><i>Y/N</i></th> </tr> </thead> <tbody> <tr> <td style="height: 20px;"> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td style="height: 20px;"> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	<i>Position</i>	<i>Company</i>	<i># of Years</i>	<i>Y/N</i>									EMPLOYMENT BACKGROUND
<i>Position</i>	<i>Company</i>	<i># of Years</i>	<i>Y/N</i>										
<p>Preferred Working Environments:</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 25%;"> <input type="checkbox"/> Alone <input type="checkbox"/> With Others </div> <div style="width: 25%;"> <input type="checkbox"/> Outdoors <input type="checkbox"/> Indoors </div> <div style="width: 25%;"> <input type="checkbox"/> With Lots of Freedom <input type="checkbox"/> In a Quiet Setting </div> </div> <p>Preferred Programs:</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <input type="checkbox"/> Children <input type="checkbox"/> Teenagers </div> <div style="width: 20%;"> <input type="checkbox"/> Adults <input type="checkbox"/> General Public </div> <div style="width: 20%;"> <input type="checkbox"/> Elderly <input type="checkbox"/> Other </div> <div style="width: 20%;"> <input type="checkbox"/> Animals </div> </div> <p>Indicate Choices in order(1,2,3,4etc.) I might enjoy an assignment as a (an).....</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Child Care Volunteer <input type="checkbox"/> Firefighter <input type="checkbox"/> Food Services <input type="checkbox"/> Gardener </div> <div style="width: 30%;"> <input type="checkbox"/> Accountability Officer <input type="checkbox"/> Rehab Officer <input type="checkbox"/> Safety Officer <input type="checkbox"/> Pump Operator/Driver </div> <div style="width: 30%;"> <input type="checkbox"/> Photographer </div> </div> <p>How did you hear about Centre Hastings Fire Department Volunteer Service?</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Newspaper <input type="checkbox"/> Radio <input type="checkbox"/> Other Volunteers </div> <div style="width: 30%;"> <input type="checkbox"/> Web Page <input type="checkbox"/> Brochure/Pamphlet </div> </div>	VOLUNTEER INTERESTS												

VOLUNTEER INTERESTS

What would you like to gain from your volunteer experience?

- | | |
|--|--|
| <input type="checkbox"/> Personal Satisfaction | <input type="checkbox"/> Improving the quality of life for someone |
| <input type="checkbox"/> Firefighter Certification | <input type="checkbox"/> Employment Preparation |
| <input type="checkbox"/> Meet School Requirements | <input type="checkbox"/> Help Extend Community Services |
| <input type="checkbox"/> Other _____ | |

Other agencies whom you have volunteered:

<i>Agency</i>	<i>Province</i>	<i>Position</i>	<i>Dates</i>

SKILLS

Talents / Hobbies

- | | | | |
|--------------------------------------|-------------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Drawing | <input type="checkbox"/> Cooking | <input type="checkbox"/> Crafts |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Gardening | <input type="checkbox"/> Computer | <input type="checkbox"/> Sewing |
| <input type="checkbox"/> Farming | <input type="checkbox"/> Acting | <input type="checkbox"/> Singing | <input type="checkbox"/> Dancing |
| <input type="checkbox"/> Antiques | <input type="checkbox"/> Instrument | <input type="checkbox"/> History | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Pet Care | <input type="checkbox"/> Sports | <input type="checkbox"/> Magic | <input type="checkbox"/> Speaking |
| <input type="checkbox"/> Other _____ | | | |

Office Skills

- | | | |
|--|--|--------------------------------------|
| <input type="checkbox"/> Copying/Filing | <input type="checkbox"/> Book keeping | <input type="checkbox"/> Switchboard |
| <input type="checkbox"/> Typing | <input type="checkbox"/> Stuff Packets | <input type="checkbox"/> Calculator |
| <input type="checkbox"/> Computer Software | | |

Languages English French Other _____

Skills I would like to learn: _____

I have read and understand this application and certify that all statements provided on this form are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that misrepresentation of facts shall be considered basis for rejection of my application or discharge if accepted. My signature authorizes my listed references permission to release any information regarding my character, volunteer, or employment experiences.

Signature of Applicant

Date