



Village of Lake Bluff Fire Department Application for Volunteer Fire Fighters

Please Read and Sign: I certify that the information provided in this volunteer application is true and complete to the best of my knowledge. I understand and agree that any incorrect statement, falsification, misrepresentation or omission of any information provided in my application, interview(s), or other volunteer forms, whenever or however discovered, will be sufficient reason not to accept me as a volunteer with the Lake Bluff Fire Department and shall be grounds for discontinuing my volunteer status. I further understand that this application is not intended to be a contract of employment, nor is it a request for an offer of employment.

I authorize the Village of Lake Bluff to thoroughly investigate all statements contained in my application for volunteer fire fighter, interview(s) or other volunteer forms. I further authorize the Village to conduct an investigation of my background, including my criminal history, credit history and driving record. I agree to cooperate in any such investigation, and release and discharge from all claims, demands, liabilities or damages of any kind or nature all persons or entities requesting or supplying information pursuant to such an investigation, including the Village, any reference from whom information is obtained and any third party that provides information to the Village. If I have prior experience as a fire fighter, I authorize my current and former employers and entities for which I have performed volunteer fire fighting services to disclose information regarding my fire fighting experience, without giving me prior notice of such disclosure. I also understand that, if appointed to the Lake Bluff Fire Department, I am required to abide by all rules, ordinances and regulations of the Village of Lake Bluff and the Lake Bluff Fire Department that apply to volunteer fire fighters.

NAME (please print)

PREVIOUS ADDRESS (LESS THAN 7 YRS)

SIGNATURE

DATE

EMAIL ADDRESS

PHONE NUMBER

DATE OF BIRTH

ADDRESS

DRIVER'S LICENSE NUMBER AND STATE

CITY/STATE/ZIP CODE

SOCIAL SECURITY NUMBER



LAKE BLUFF FIRE DEPARTMENT

FIREFIGHTER APPLICATION

1. Name: _____
Last First Middle

2. List any other names you have used or been known by (include maiden name):

3. Address: _____
Number & Street City State Zip

4. Home Phone No. (_____) _____

5. Business Phone No. (_____) _____

6. Cell Phone No. (_____) _____

7. Email Address: _____

8. Date of Birth: _____

9. Driver's License No. _____ Driver's License State: ____
Class _____

10. Social Security No. _____

11. U.S. Citizen? Yes _____ No _____
If no, are you an alien with evidence of intention to become a U.S. Citizen?
Yes _____ No _____

**LIST ALL FORMER ADDRESSES FOR THE PAST FIVE YEARS IN
CHRONOLOGICAL ORDER**

12. Address _____
Number & Street City State Zip

13. Address _____
Number & Street City State Zip

14. Address _____
Number & Street City State Zip

15. Address _____
Number & Street City State Zip

16. Address _____
Number & Street City State Zip

EDUCATION

17. CIRCLE HIGHEST GRADE COMPLETED:

GED CERTIFICATE	HIGH SCHOOL 1 2 3 4	COLLEGE 1 2 3 4
GRADUATE SCHOOL	M.A.	Ph.D. OTHER

Name and Address of School (Include City and State)	Date(s) Attended	Graduate? Yes No
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18. High School _____

19. Undergraduate Education _____

20. Graduate Education _____

21. Trade Schools _____

22. What college degrees have you attained? _____

23. List course work relevant to position for which you have applied: _____

24. Do you live within three miles of the Lake Bluff Fire Station?

Yes _____ No _____ If no, how far: _____

25. Do you have previous firefighting experience?

Yes _____ No _____

If Yes, explain _____

MILITARY

26. Are you now or have ever been in the military service? Yes_____ No_____

27. Branch of service _____

28. Are you now or were you ever an active member of any branch of the U.S. Military Reserve Forces or National Guard Unit? Yes_____ No_____

Rank _____

29. Unit _____ From _____ To _____

CONVICTION HISTORY

30. Have you ever been convicted of a crime other than minor traffic violations?

Yes _____ No _____

If "Yes," explain below:

DATE	POLICE AGENCY	OFFENSE	DISPOSITION OF CASE

31. List all traffic convictions and accidents you have had in the last four years. (If more room is needed, please type on a separate page and attach).

LOCATION (CITY-STATE)	APPROXIMATE DATE	VIOLATION	DISPOSITION

EMPLOYMENT HISTORY

List all jobs you have had for the last Five years. Include periods or unemployment. Put your present job first. Include military service in proper time sequence along with temporary or part-time jobs.

32. **Employer's name:** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to us contacting them? _____

Employed _____ **to** _____ **Salary** _____ **Per** _____
Month-Year Month-Year

33. **Employer's name:** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to us contacting them? _____

Employed _____ **to** _____ **Salary** _____ **Per** _____
Month-Year Month-Year

34. **Employer's name:** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to us contacting them? _____

Employed _____ **to** _____ **Salary** _____ **Per** _____
Month-Year Month-Year

35. **Employer's name:** _____ **Phone** _____

Address _____
Number & Street City State Zip

Job Description _____

Do you object to us contacting them? _____

Employed _____ **to** _____ **Salary** _____ **Per** _____
Month-Year Month-Year

36. Have you ever been suspended or terminated, other than from an economic layoff, from any prior employment? Yes _____ No _____ If yes, please explain:

37. Have you ever resigned from any employment position because of misconduct or unsatisfactory performance or while under investigation? Yes _____ No _____

If yes, explain: _____

38. Have you ever taken a civil service exam? Yes _____ No _____

Agency _____ Date _____ Position on List _____

Status _____

39. Have you applied to other Fire Departments? Yes _____ No _____

If yes, please list:

40. Are you currently on any eligibility list(s)? Yes _____ No _____

If yes, indicate position applied for, status on list and expiration date of each: _____

41. List organizations of which you are a member that relate to the position for which you are applying: _____

42. Explain your reasons for wanting to become a firefighter and/or EMT for the Lake Bluff Fire Department: _____

43. If accommodation is needed, please explain: _____

EMERGENCY CONTACT INFORMATION

44. Person(s) to be notified in case of emergency.

Name _____ Address _____

Hm Phone _____ Cell Phone _____

Relationship _____

Name _____ Address _____

Hm Phone _____ Cell Phone _____

Relationship _____

Name _____ Address _____

Hm Phone _____ Cell Phone _____

Relationship _____

I HEREBY CERTIFY THAT I HAVE READ THE ABOVE QUESTIONS AND STATEMENTS, AND I CERTIFY THAT THERE ARE NO MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS IN THIS QUESTIONNAIRE, AND THAT ALL MY ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT MISREPRESENTATIONS, OMISSIONS OR FALSIFICATIONS ON THIS QUESTIONNAIRE OR AT ANY TIME DURING THE HIRING PROCESS MAY RESULT IN MY APPLICATION NO LONGER BEING CONSIDERED OR IN TERMINATION OF MY MEMBERSHIP WITH THE LAKE BLUFF FIRE DEPARTMENT.

Signature in Full _____

Dated at _____ Illinois, this _____ day of _____, 20_____.