



# GOLDSBORO VOLUNTEER FIRE COMPANY

700 Old Line Rd ♦ PO Box 35 ♦ Goldsboro, MD 21636  
410-482-6196 ♦ [www.goldsboro700.com](http://www.goldsboro700.com)

## Application for Membership

1. To apply for membership, you must be 16 years of age or older as of the date of application.
2. All applicants understand that membership is probationary for a period of 18 months. During these 18 months you must demonstrate your ability and commitment as outlined in the departments by-laws.
3. Membership is contingent upon the results of a background check. The withholding of information or making of false statements will constitute grounds for immediate dismissal.
4. All applicants must agree to these terms and certify that all statements are true. Your signature on this application indicates such an agreement.
5. Physical examination, a copy of your driving record and a criminal background check may be required after an interview has been completed with the GVFC membership committee.
6. Applications can be mailed or delivered to the station at the above listed address.
7. Please read carefully and then type or print your responses on this application.

Please retain this page for your records



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**Please read carefully and answer each of the following questions.**

## **A. Personal History:**

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Current Address: \_\_\_\_\_  
\_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact #: \_\_\_\_\_

## **B. Education:**

High School-

Name: \_\_\_\_\_

Location: \_\_\_\_\_ Date graduated: \_\_\_\_\_

College-

Name: \_\_\_\_\_

Location: \_\_\_\_\_ Date graduated: \_\_\_\_\_

Specialty Training-

Name: \_\_\_\_\_

Location: \_\_\_\_\_ Date graduated: \_\_\_\_\_



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## C. Employment:

Name of current employer: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Supervisor Phone #: \_\_\_\_\_

Position: \_\_\_\_\_ Length of employment: \_\_\_\_\_

List of prior employer(s):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_



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## D. Driving Record:

Are you a licensed driver? (circle one)      YES      NO

Have you had any moving violations in the last 3 years?      YES      NO

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

## E. Fire/EMS/Administrative Previous Experience:

Indicate which area you are interested in (circle one):

FIRE                      EMS                      ADMINISTRATIVE ONLY

Have you ever been a member of a fire department, EMS company or other emergency services organization before?      YES      NO

If so, please provide the organization(s) name, address, telephone number, dates of membership and offices held if applicable:

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\*\* By the date of your interview, you will be required to provide a written letter of recommendation from the organizations listed above.



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## F. References:

List 3 people, not relatives, who are familiar enough with you to provide a reference.

- Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

\_\_\_\_\_

Telephone #: \_\_\_\_\_

- Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

\_\_\_\_\_

Telephone #: \_\_\_\_\_

- Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

\_\_\_\_\_

Telephone #: \_\_\_\_\_

List any members of the Goldsboro Volunteer Fire Company that you know: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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Have you ever been denied membership to any fire, rescue or EMS organization?    YES            NO

If yes, name of organization and reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever completed any fire, rescue or EMS training?    YES            NO

If yes, please attach documentation of your training and list classes and dates: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any special skills or abilities for membership that you feel could benefit the Goldsboro Volunteer Fire Company?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been a member or applied for membership with GVFC?

YES

NO

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_