

SCOTIA FIRE DEPARTMENT
APPLICATION FOR MEMBERSHIP

Date _____

1. _____
(Last Name) (First Name) (M.I.)

2. _____
(Address) (Apt./Suite No.)

(City, Town, Village) (State) (Zip Code)

3. Telephone: (____) _____ (____) _____ Email _____
(Home) (Cell)

4. How long have you lived at above address? Years: _____ Months: _____

5. Are you 18 years of age or older? Yes ___ No ___

6. Do you have a valid New York State Drivers License ? Yes ___ No ___ (attach a copy of your license to this application)

Please indicate your availability and the Type of Fire Department Membership your requesting

Day _____ Evenings _____ Nights _____

Type of Fire Fighter:

Interior _____ Exterior only _____ EMT _____

7. Previous emergency services experience: (Include only fire, rescue, police, and emergency medical service agencies).

Name of Agency _____

Address _____

Contact Person _____ Telephone _____

APPLICANT'S AUTHORIZATION FOR RELEASE OF INFORMATION

In order to confirm the information I supplied on my application for membership with the Scotia Fire Department, I authorize all licensing agencies, educational institutions, law enforcement agencies, present and former employers, and the military service to disclose their relevant records about me to the Scotia Fire Department whether the information be of public, private or confidential nature; and I release them from any liability and responsibility from doing so. This authorization, in original copy form, shall be valid for this and any future information, reports or updates that may be requested.

I understand that this form will accompany request for official documents and confirmation of my credentials.

Applicant Name (Please Print)

Applicant Signature Date

Department Approval: Name: _____ Title: _____ Date _____

Village Approval: Name: _____ Title: _____ Date _____

PRIVACY NOTIFICATION

Section 94 of the Public Officers Law (Personal Privacy Protection Law) requires that you be notified of the following facts when information which will be maintained in a record system is collected from you.

The authority to request and confirm personal information about you is found in article 6 of the Executive Law.

The information obtained will:

Be used to determine your qualifications for the position for which you are applying;

Be released to the fire chief and your potential supervisors; and

Be maintained in your personal file (if you become a fire company member) or in our resume file for six months (if you are not a fire company member).

Failure to provide the information or authorization will result in your application not being considered for membership.

The information will be maintained by Chief of the Scotia Fire Department.