

East Whiteland Township Volunteer Fire Association 205 Conestoga Road Malvern, PA 19355



APPLICATION FOR MEMBERSHIP

If you have any questions pertaining to the membership application or membership process, please send an email to:

membership@eastwhitelandfire.org

Complete the below checklist before turning in your application:

☐ Fully completed & signed application
☐ Parent/Guardian signatures and working papers (Junior Members only)
☐ Completed PA Child Abuse Check (Applicant's expense, https://www.compass.state.pa.us/cwis/public/home)
☐ Completed FBI Background Check (only if the applicant has resided outside of PA within the past 10 years, if so, please contact association)
☐ Driver's History Check Form (https://www.dot.state.pa.us/Public/DVSPubsForms/BDL/BDL%20Form/DL-503.pdf)
☐ Copy of PA Driver's License or other State Issued Identification
☐ Copy of all Emergency Service certifications (if applicable)
☐ Medical Release form (must be signed by a licensed medical provider)

The Company welcomes you to attend our Monday night training prior to turning in your application and interview process. While not necessary, we strongly encourage it.

Training is held every Monday night at 19:00 (7 PM).

Applicants will be contacted by a representative of the membership committee within 1 month of application submission to schedule an interview, which will include a tour of the firehouse. A Parent/Guardian will be required to attend the interview for Junior Members.

We thank you for your interest in the East Whiteland Township Volunteer Fire Association!

Edited 8.2022

Personal Information

Applying for:	□ Fire/Rescue	□ Emergency Medical Services	□ Fire Police	
	□ Administrative	□ Auxillary		
Name:				
	Last	First	Middle	
Address:				
	Number	Street	Apt	
	City	State	Zip Code	
Primary Phone	:	Secondary Phone:		
Email:				
	re of Birth: Social Security Number:			
Are you 18 year	rs or older? □ Yes	□ No		
Are you over th	ne age of 16, but und	er the age of 18? \square Yes \square No)	
* If yes,	complete Junior Me	mber Section		
Have you lived	outside of PA in the	past 10 years? ☐ Yes ☐ No		
Driver's Lice	ense Information			
* Please attach	a copy of your Drive	er's License to this application		
License Numbe	er:	State:	_ Class:	
Restrictions:		Expiration:		
	Contact Informatio			
Name:		Name:		
	:			
	ne:			

Education	
School:	
	Years Attended:
Employment	
Employer:	
Address:	
Title:	
Supervisor:	Phone:
Professional References	
Name:	Name:
Email:	
Primary Phone:	
Secondary Phone:	Secondary Phone:
Relation:	Relation:
Emergency Services Experi	ience
Name of Organization:	
Address:	
Address:Position(s) Held:	
Address: Position(s) Held: Dates:	
Address: Position(s) Held: Dates: Reason for Leaving:	

Emergency Services Certifications

* Please include a co	py of all certifications wit	th this application	
Do you have any curr	rent certifications?	Yes □ No	
☐ Firefighting	□ Rescue	□ EMS	☐ Fire Police
Junior Membershi	ip		
* Only complete this	section if the applicant is	16, but not yet 18 years old	
Who is completing th	nis section? □ Parent □	Legal Guardian	
I hereby certify that t	his application is being su	bmitted with my full consent	. □ Yes □ No
I hereby certify that t	he applicant is at least 16	years of age. □ Yes □ N	o
Name Printed:			
Date:	P	hone:	
Internal Use Only	у		
Background Check	completed? □ Yes □	No Result:	
Active Member:		Signature:	
Active Member:		Signature:	
Membership Comm	ittee:	Signature:	
Date of Application	Reading:	<u></u>	
Probationary is:	l Approved □ Denied	Date:	
Permanent Members	ship is: ☐ Approved ☐	Denied Date:	
Member ID Number	r:Tags	Issued: □ Yes □ No ID Is	sued: □ Yes □ No

Waiver and Release for Background Investigation

I hereby grant permission for the Membership Committee of the East Whiteland Township
Volunteer Fire Association (The "Association") to conduct a thorough investigation into my background,
previous employment, education, and references in order to ascertain if I am suitable for membership in
the association. This background check will include, but not necessarily be limited to, interviews with my
family, acquaintances, current and former employers, co-workers, neighbors, references, teachers, and
school officials. In addition, my credit history and record of criminal convictions may be investigated. I
hereby release, indemnify, and hold harmless the association and its officers, employees, and members,
from and against any and all liability that might result from conducting such investigation.

Applicant Signature:	Date:
Parent/Guardian Signature (If under 18): _	Date:

Act 168 of 2006 amended Title 18 (Crimes and Offenses) of the Pennsylvania Consolidated Statutes, Section 2, subsection (h) (1) Arson and related offenses reads: A person convicted of violating this section or any similar offense under Federal or State law shall be prohibited from serving as a firefighter in this Commonwealth and shall be prohibited from being certified as a firefighter under Section 4 of the Act of November 13, 1995 (P.L. 604, No.61), known as the State Fire Commissioner Act. All individuals making application for certification testing must provide documentation of a background check. Proof of a non-conviction MUST consist of either of the following:

- 1. An official criminal history record check obtained persuant to Chapter 91 (relating to criminal history record information) indicating no arson convictions. OR
- 2. By dating and signing of the following statement by the person swearing to the following: I have never been convicted of an offense that constitutes the crime of arson and related offenses. Under 18 Pa.C.S 3301 or any similar offense under any Federal or State law. I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein, I am subject to penalties prescribed by law, including, but not limited to, a fine of at least \$1,000.00?

Name of Certification Applicant:	
Applicant Signature:	Date:
Parent/Guardian Signature (If under 18):	Date:
Have you ever been convicted of any type of misdemeanor or felony? If yes, please explain:	□ Yes □ No

IF YOU HAVE RESIDED OUT OF PENNSYLVANIA FOR ANY LENGTH OF TIME WITHIN THE LAST 10 YEARS, PLEASE CONTACT <u>MEMBERSHIP@EASTWHITELANDFIRE.ORG</u> TO DISCUSS FBI BACKGROUND CHECK

Medical Release Form

* Please note this form must be signed by a lic submission	ensed medical provide	er prior to application
lease list any medical conditions, allergies, and/or medications that the Fire Company should ware of:		
Applicant Signature:		Date:
Parent/Guardian Signature (If under 18):		
Licensed Medical Provider Release		
 Tasks that this applicant may be required to pe Lifting, carrying, and/or dragging patie Working in hazardous and/or high-stree Responding to calls in the middle of the Exposure to extreme heat/cold for external cause Subjection to situations that may cause 	ents weighing 100 pour ss environments and si e night nded periods of time	nds or more ituations
I have recently examined the applicant and ha him/her from properly performing his/her duti Volunteer Fire Association.	v	-
Provider Signature:	Title:	Date:
Provider Printed Name:		
Address:		
Phone:		