

SHOSHONE COUNTY FIRE PROTECTION DISTRICT No. 1

Volunteer Application and Membership Standards

TO APPLY:

- 18 years of age or older
- High School Diploma or GED
- Idaho State Driver's License
- Meets appearance and conduct standards outlined in SCFPD 1 Personnel Policy

PRIOR TO ACCEPTANCE:

- Introduction to the duty crew members
- Background Check
- Interview with an Officer
- Attendance of one monthly Fire/EMS training

YEARLY EXPECTATIONS:

- In District Personnel- (living within District boundaries at Chief's discretion)
 - Respond to emergency calls as available*
 - (1) 12 hour shift per month
- Out of District Personnel- (Living outside District boundaries at Chief's discretion)
 - (2) 12 hour shifts per month
- Training in District and out of District Personnel
 - Must attend 50% of scheduled monthly trainings pertaining to your skills(fire/ems/both)**
 - Must assist in instruction of 1 training annually

VOLUNTEER ASSOCIATION:

- Tracking
 - Volunteer Officer will track/record the volunteers training level and participation for evaluation.
 - Participation will be evaluated every six months. (January and July)
- Evaluation
 - After a six month evaluation period any volunteer not meeting the minimum requirements will be informed and be placed on alert for the next evaluation period
 - If a volunteer fails to meet the minimum requirements for two consecutive six month periods, aside from extenuating circumstances, the volunteer will be informed and turn in any gear issued to him/her by SCFPD#1

BENEFITS:

- Service to the community in a positive team atmosphere
- EMT certification, and FF1 certification paid for by the district with a 1 year service commitment.
- Monthly training to keep certifications and skills current
- Incentive points for training and shifts
- Hiring preference for volunteer candidates

I _____, have read and understand these minimum membership standards and what will be expected of me as a volunteer with Shoshone County Fire Protection District #1. I do hereby agree to the Minimum Membership Standards and I understand the consequences of not meeting these minimum standards. I as a representative of this fire district and community, will do my utmost to fulfill these standards as a volunteer with Shoshone County Fire Protection District #1.

Signature of Applicant _____

Date _____

*Must respond to a minimum of two calls per six month evaluation period.

**50% of trainings that occur in a six month evaluation period. Missed trainings can be made up on scheduled shifts with duty crew.

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Volunteer Application

PLEASE PRINT

Name: Last First Middle Date:

Street Address:

Mailing Address:

Home Phone: Cell Phone: Work Phone:

Email address:

Why do you want to be a volunteer firefighter?

Desired Position: (Circle one or both) Firefighter EMT

Please list any previous volunteer or career experience and/or training in either field:

Currently Employed? (Circle one) Yes No
If so Where?

Do you have a valid driver's license? (Circle one) Yes No Driver's license #:
CDL Class: State: Expiration Date:

Have you ever been convicted, fined or placed on parole, probation, or been given a suspended sentence in a court of law? (Circle one) Yes No
If yes please explain

Highest Education Received: (Enter highest year completed)
High School
College
Subject/Degree (s)

Participation in any position requires many hours of classroom training. Are you available to attend training sessions at night and on weekends?

Do you have transportation? (Circle one) Yes No

Please list your skills, interests, hobbies, and community activities you have been involved in:

Please list the name, address and phone number of at least 3 references:

Name	Phone	Relationship
1) _____	_____	_____
Address _____		
2) _____	_____	_____
Address _____		
3) _____	_____	_____
Address _____		
4) _____	_____	_____

Emergency Contact:

Name _____	Phone _____	Relationship _____
Address _____		

Signature of Applicant _____

