

## **Boulder Mountain Fire Protection District Application for Volunteer Membership**

Please fill out entire application, submit completed application with your signature, a copy of your driver's license and all current certifications to: Boulder Mountain Fire Protection District, 1905 Linden Drive Boulder, CO 80304, or you can fax your entire application to (303) 440-5247.

Boulder Mountain Fire Protection District is an equal opportunity employer.

### **Personal Information**

Date: \_\_\_\_\_

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

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

City, State, ZIP: \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Pager: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Sec #: \_\_\_\_\_

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

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

Emergency Phone Number: \_\_\_\_\_

Have you been convicted of any traffic or non-traffic misdemeanors or felonies?  
Yes\_\_\_\_ No\_\_\_\_

If you answered yes, list dates and states in which convictions occurred:

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Do you possess a valid Driver's License? Yes\_\_\_\_ No\_\_\_\_

If yes, what state? \_\_\_\_\_ License #: \_\_\_\_\_

exp. date: \_\_\_\_\_

List the number of traffic convictions and assigned points, which you have received for any moving violations during the past 5 years:

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Is your license currently restricted due to previous convictions? Yes\_\_\_\_ No\_\_\_\_

If yes, how?

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Do you have any pending convictions? Yes\_\_\_\_ No\_\_\_\_

If yes, please describe:

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## Education/Training/Qualifications

Do you have a high school diploma or GED? Yes\_\_\_\_ No\_\_\_\_

If yes, circle highest grade completed: [12] [13] [14] [15] [16] [Graduate]

Degree obtained and major field of study: \_\_\_\_\_

If you have any of the following certifications, list issuing agency and exp date:

Colorado State FFI FFII: \_\_\_\_\_

Colorado State EMT (Basic, Intermediate, Paramedic and any associated certs):

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Wildland Fire Certifications: \_\_\_\_\_

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List any special training, which may be significant to BMFPD:

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## References

Please list three references below, local if possible and no family members. You must include phone numbers:

<u>Name</u>	<u>Occupation</u>	<u>Phone</u>	<u>Years known</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### Administration use only

Application reviewed by: _____	Date: _____
BMFPD Officer review: _____	Date: _____
BMFPD Board review: _____	Date: _____
CBI background check: _____	Date: _____
Boulder County check: _____	Date: _____
Application Status:	
<input type="checkbox"/> Approved	
<input type="checkbox"/> Denied	
Reason for denial:	
_____	
_____	

## **Applicant's Statement**

My signature below verifies that I have read and understood every question on this application. The information provided is accurate and complete to the best of my knowledge. Any falsification or misrepresentation of any information on this application may be grounds for termination or denial.

By signing below, I authorize BMFPD and/or its agents to investigate all information provided by me on this application.

My signature below releases BMFPD, all law enforcement agencies, schools, personal and job references listed from any and all liability concerning the release of information regarding my background.

My signature verifies that I understand that the use of alcohol and/or illegal drugs is prohibited while at work.

My signature verifies that I understand that unsatisfactory results of a background and/or driving check may result in termination or denial at any time. Unsatisfactory results include but are not limited to felony convictions, multiple misdemeanors, DUI/DWAI, multiple or severe traffic convictions.

My signature acknowledges that I understand that by signing this statement, a position with BMFPD may only be offered by the District Fire Chief, District Board of Directors or their designee.

I understand that that if offered a position of employment, I am an employee at will, and that the District's Volunteer and Employee Handbook or other written guidelines shall not operate to change such status.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_