

# DUNLAP VOLUNTEER FIRE AND RESCUE DEPARTMENT APPLICATION FORM

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_ Marital Status \_\_\_\_\_

Phone \_\_\_\_\_ Occupation \_\_\_\_\_

Please answer the following----

1. Have you ever taken any first aid or CPR courses? \_\_\_\_\_
2. Would you be willing to take an EMT course ASAP? \_\_\_\_\_  
(must be complete within 2 years from your start date or face termination-we are a combined department and want all new members EMT trained ASAP)
3. Have you had any firefighting or rescue experience \_\_\_\_\_
4. Are you willing to be trained at a Firefighter I level \_\_\_\_\_  
(must be trained at FFI level to safely be on a fireground or extrication Scene)
5. Have you ever had any mental problems (treated by a physician) that could interfere with your safe performance \_\_\_\_\_
6. Have you had any misdemeanors or felony arrest or convictions? \_\_\_\_\_
7. Do you have a current Iowa drivers license? \_\_\_\_\_  
Endorsements: \_\_\_\_\_
8. Do you have a high school diploma or GED? \_\_\_\_\_ Year \_\_\_\_\_
9. Could you make unit/fire runs during the day? \_\_\_\_\_ Night? \_\_\_\_\_

10. Why would you be willing to serve on the department? \_\_\_\_\_

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I understand that this application is merely to place my name up for the consideration for serving with the Dunlap Volunteer Fire and Rescue Department and in no way holds the department under obligation to select me.

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Applicant's Signature