



BARNARD FIRE DEPARTMENT

of Greece, New York
3084 Dewey Avenue
Rochester, New York 14616

~ APPLICATION FOR MEMBERSHIP ~

The Barnard Fire Department is an equal opportunity organization. By NYS Law, **we will not** discriminate on the basis of race, color, religion, national origin, age, gender, disability or any other status protected by law or regulation. It is our intention that all qualified applicants are given equal opportunity and that selection decisions are based on membership and volunteer position factors. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon volunteer position information.

Instructions:

- **Please print** or type your answers, except for required signatures on the application.
Incomplete or illegible applications will not be processed
- Applications must be returned or mailed to the Barnard Fire Department, **Attn: Invest. Comm.**
- Application without an affidavit signature on the last page will not be accepted.

Date _____

1. _____
Print (First Name) Print (Last Name) (M.I.) Maiden Name or Alias (if any)

2. _____
Print (Address) (Apt. /Suite No.) Zip Code

List (1) previous address _____

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

4. DOB _____ Place of birth _____ Age ____ SS # (Last four digits) _____

Racial appearance (White/black/Am.Ind/Japan./Chin./other _____

(Note) This information is used solely for the purpose of the required NYS Arson background checks

5. Highest degree of education _____ Citizen of the U.S.? _____

6. How long have you lived at the above address? Years: ____ Months ____

7. Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties of a firefighter or any injuries or health issues that may impact your ability to be a volunteer firefighter? Yes () No () if yes, please explain in additional information.

8. Are you currently employed? Yes [_] No [_] Occupation _____

If "Yes", give employer information below.

Name of Company _____

Address _____ Telephone (____) _____

May we contact your employer as a reference? Yes [_] No [_]

9. Do you have a valid New York State Driver's License? Yes [] No []
Drivers License ID# _____ Class _____ Other _____

10. Please indicate your availability to participate in normally required fire department activities. (i.e.; meetings, drills and emergency calls) Please check all appropriate time periods:

Weekdays: Days [] Evenings [] Nights []

Weekends: Days [] Evenings [] Nights []

11. Any Previous Emergency Services experience: (include any fire, rescue, police & EMS agencies)

Agency Name _____

Address _____

Contact Person _____ Telephone _____

(If more space is required, please identify under additional information)

12. Have you ever been a member of the U.S. Armed Forces? Yes [] No []

If "Yes", did you receive an Honorable Discharge? Yes [] No []

A Dishonorable discharge is not an absolute bar from membership. This and other factors will affect a final membership decision.

If the above answer is "No", give complete details in the space provided for additional information (include service branch and service dates).

13. Have you ever been convicted or plead guilty to a felony, misdemeanor, insurance fraud, arson or a reduction of one of these offenses? Yes [] No [] If yes, give details under additional information.

14. Please list three personal references, other than members of this organization, who have known you at least three (3) years:

a.) Name: _____ Telephone #: _____

Address: _____

b.) Name: _____ Telephone #: _____

Address: _____

c.) Name: _____ Telephone #: _____

Address: _____

15. Please list any acquaintances or friends that are members of this organization:

16. The Barnard Fire Department requires that you receive and **pass** a baseline firefighter physical examination before becoming an *Interior* structural firefighter. The department designated occupational medical service provider will conduct this physical at no cost to you.

You must successfully pass!, the physical in order to be considered and/or accepted to active membership as an *Interior* firefighter. The baseline exam will include the following:

- NFPA 1982 Medical history and physical
- Respirator clearance
- PFT - Pulmonary Function Test, (Lungs)
- CXR – Chest X-ray
- Audiometry (hearing)
- Visual acuity (eyes)
- Electro Cardio Gram (heart)
- Blood work
- Hepatitis B Immunization
- PPD Test (Tuberculosis)
- Hepatitis C titer
- Drug and Alcohol Screening
- If medically indicated, tetanus, cardiac stress test

~ Additional Information ~

Within the Freedom of Information Law, all information contained/or obtained herein will remain confidential and will be used only for the internal membership processing.

In witness whereof, this Application has been subscribed this ____ day of _____, 20____, by the undersigned applicant who affirms that the statements made herein are true under penalties of perjury.

Applicant's Signature: _____

Date: _____

State of New York

County of Monroe

Sworn to before me this _____ day of _____ 20 _____

Notary Public

My commission Expires _____

Notary Stamp

Privacy Notification

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

The authority to request and confirm personal information on you is found in Article 6 of the NYS Executive Law.

The information obtained will:

- Be used to determine your qualifications for the position for which you are applying and held confidential.
- Be released only to the Fire Chief and the Investigating Officer.
- Be maintained in your personnel file (if you become a fire dept. member) or in our records for six (6) months (if you are not a company member).

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

This information will be maintained confidential on file by the Department Secretary of the Barnard Fire Department,



Barnard Fire Department

Applicant's Authorization for Release of Information

In order to confirm the information I supplied on my application for membership with the Barnard Fire Dept.

I _____ (Signature)

Hereby authorize all licensing agencies, education institutions, law enforcement agencies, present and former employers, and the military services to disclose their relevant records about me whether the information be public, private or confidential nature, and release the results to the Barnard Fire Department Investigating Officer and I release them from 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. The records check shall include but is not limited to:

- NYS Department of Motor Vehicles
- NYS Arson Background
- MORIS - Local Background check

I understand that this form will accompany requests for official documents and confirmations of my credentials.

Applicant Name

(Please Print)

Applicant Signature

Date

State of New York
County of Monroe

Sworn to before me this: _____ day of _____, 20____

(Notary Public)

My Commission Expires: _____

Notary Stamp

Report of Investigating Committee

The applicant was interviewed by the Investigating committee on (date) _____

Location of Interview (address) _____

Committee Members sign below (give title if any)

Remarks: _____

Found acceptable for vote, Yes _____ No _____ If No, Reason _____

Balloted upon and elected to Membership on _____ Sworn-in date _____

Resignation or Removed date: _____ Reapply date (if applicable) _____

(Official Barnard Use Only)

Application Received : (date) _____	Date Dept. letter sent to BOC _____
Copy of Driver License Received On : _____	Date approved by BOC _____
Background request Sent To PD On : _____	BOC Resolution # _____
Received reply by (date) Greece PD _____	By Laws issued : _____ date
MC Sheriff _____	Code of Ethics signed and on file : _____ date
Initial Physical Ability (Pass or Fail): _____	Code of Conduct signed and on file : _____ date
Written evaluation test given (Y or N): _____	1 year Probation completed on: _____ date
Interview Completed Date: _____	

Dear Applicant:

Thank you for your interest in the Barnard Fire Department.

Volunteering can be and is an extremely rewarding endeavor, especially in the Fire Service. Our District relies on our volunteers in conjunction with our career staff to perform firefighting duties, emergency medical services, rescue and much more in servicing the citizens of the fire district. Our department responds to approximately 2900 calls per year for service. We are a very busy and active combination department.

To provide this service requires a great deal of commitment and teamwork by all to be successful. Please consider the following requirements in applying for membership and after acceptance.

- Must be 18 years of age with a High School Diploma or GED and a US citizen.
- Your application **must** be notarized in two locations on the form, before acceptance
- Must live within the Barnard Fire District or extended boundaries
- Complete an interview with Barnard Investigating officers
- Complete a 30 question evaluation questionnaire (non pass or fail)
- Pass a physical ability test before next step (pass or fail)
- Schedule and **successfully pass** a baseline firefighters physical
- Attend required basic training to be certified as NYS Firefighter 1. Consists of 22 weeks of basic training, 2 times per week, 4-5 hours per class until graduation. Or a 2 week intensive course designed for those who cannot commit to nights and weekends
- Attend initial (TNG) training at Barnard to become familiar with our policies, procedures and equipment
- Serve bunker duty at the firehouse for a minimum of 6 hours per month responding to all calls with the career staff and equipment once accepted
- Respond to 20% (minimum) of calls for service once cleared by the Barnard Training Division
- Complete annual firefighter physical
- Attend monthly departmental meetings unless excused.
- Attend monthly department drills (1 to 2 per month).
- Participate in all fund raising events such as annual carnival and others
- All additional activities as ordered by the Chief of the Department

All of our members understand the importance of customer service to the residents of the Barnard Fire District. They take initiative, follow procedures, maintain high standards, promote teamwork and display professionalism at all times.

Your choice, to become a volunteer at Barnard, will take self motivation and a considerable commitment of time and the same competencies as the rest of our team.

Lastly and most importantly, making the decision to become a volunteer firefighter is a big one. It is a time consuming responsibility. It involves a great deal of training and much time away from home initially and at lesser amounts thereafter. It's something that each applicant must give serious thought to, before making the decision to become a volunteer. We suggest that you discuss the possibility thoroughly with the significant people in your life and weigh all of your other personal and professional obligations before making a decision to become a member. If after careful consideration, you are still committed to joining the team at Barnard, we welcome you and your family and encourage you in this endeavor. If you have any questions you may contact the firehouse at 663-1113.

Sincerely,

Barnard Fire Department, Investigating Committee