

AUTHORIZATION FOR THE RELEASE OF PERSONEL RECORDS AND INFORMATION

I, _____, authorize the Malta Ridge Volunteer Fire Company to make a background investigation of my character, employment, health, driving, juvenile record, firematic record and any other area the company deems necessary.

Furthermore, I authorize anyone to whom the company may make inquiry, to provide copies of any records requested by the Malta Ridge Volunteer Fire Company.

I understand that not all investigations may be conducted geographically near the Malta Ridge Volunteer Fire Company headquarters; therefore I authorize the Fire Company to designate any person, agency or firm to act on their behalf in complete ting an investigation of my background and obtaining copies of my records.

I agree the Malta Ridge Volunteer Fire Company shall have sole discretion in determining if any record is relevant to their investigation.

This authorization shall supersede and make ineffective any restriction, document , or instruction previously filed by me or my representative, with any person, company, fire department or other organization.

Applicant's signature: _____

Subscribed and sworn to before me on: _____

Name: _____

Title or office: _____

ALL THE TIME IS THE TIME TO..... PREVENT FIRE
SUPPORT YOUR FIRE DEPARTMENT

MALTA RIDGE VOL. FIRE CO., Inc.

5 Hearn Road, Malta, New York 12020

Application for Active Membership

LAST Name _____ FIRST Name _____ MI _____

Date of Birth ____/____/____ Home Phone _____ Social Security: _____

Current Address _____

If at current address less than five years, previous address _____

Height _____ Weight _____ Drivers License # _____

Have you ever been a member of the Armed Forces? _____ Place of Birth _____

Present occupation and Employer (include phone & address) _____

Normal work hour's _____ to _____, Work days: _____ to _____

Marital status: _____ Spouses name: _____ Number of children: _____

Any physical handicaps that may prevent you from certain types of work? If yes describe: _____

Any serious illness in the past 5 years? Describe: _____

Have you ever been convicted of a crime in the past 10 years? If yes describe: _____

Have you ever been convicted of any alcohol, drug or moving related motor vehicle charges? If yes list dates and charges: _____

List 3 personal references which you have known for at least 5 years, (include name, address and phone number)

1] _____

2] _____

3] _____

****Notice to all applicants****

Federal and State law requires that all applicants be considered without regard to race, religion, color, sex, age or national origin. We believe in and support the principle of equal employment and will fulfill our obligation to the fullest.

I hereby apply for membership in the Malta Ridge Volunteer Fire Company and if accepted I agree to abide by the rules of the company and by the constitution and by-laws of the organization. I understand the fire company may investigate my qualifications for membership. I give them permission to contact such individuals and organizations as they see fit. I also grant such organization and individual's permission to provide the fire company with such information they request.

AN INITIATION FEE OF \$1.00 AND MY FIRST YEARS DUES (\$6.00) ARE ATTACHED TO THIS APPLICATION.

The dues (\$6.00) will be returned to me if my application is turned down or found to be unfavorable.

Signature: _____ Date: _____

Endorsed by (Member) _____

The signature of a parent or legal guardian is required if the applicant is under the age of 18. Such signature shall constitute permission for the named applicant to participate in all fire company activities.

Signature: _____ Date: _____

Investigation Committee Report

Investigated by: _____ Date: _____

Above applicant has been found to be _____ for active membership in the Malta Ridge Vol. Fire Co., Inc.

01/01/2004