



# New Cumberland Fire Department Volunteer Application

## PERSONAL INFORMATION

Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_  
Phone(H): \_\_\_\_\_ Phone(M): \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_ SSN: XXX-XX- \_\_\_\_\_ (last four)

## CRIMINAL BACKGROUND

Have you ever been convicted of a crime? If yes, please explain below. Yes  No

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Are you or anyone in your household a registered sex offender? Yes  No

## REFERENCES

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

Have you volunteered with a fire company or emergency services organization in the past? Yes  No

If Yes, Position: \_\_\_\_\_ Organization: \_\_\_\_\_

I understand by submitting this application that I authorize the New Cumberland Fire Department to complete criminal, reference & driving record background checks. I authorize the results of the background check(s) to be presented to the department when my application is evaluated for membership.

I certify that I am 18 years of age or older and if not, I have provided a parent/guardian signature.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature if necessary: \_\_\_\_\_ Date: \_\_\_\_\_