



[DEPARTMENT NAME]
Volunteer Application

The [Fire Corps Program Name] program is a great opportunity for you to help your local fire and emergency services departments as well your community. In order to ensure that your time and talents will be best utilized, fill out the following form and return it to (Contact/Supervisor Name).

Name _____ Date of Birth: ____/____/____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ E-mail: _____

Have you ever been convicted of a crime? yes no

If yes, please explain: _____

Is there a specific job or area you might be interested in?

[* Note: change jobs/areas accordingly to address the needs of your department]

(please check all that apply)

- Administrative
- Bookkeeping
- Explorer Post
- Grant Writing
- Life Safety Education
- Website Developer
- Auxiliary
- Chaplain Corps
- Fundraising Initiatives
- Incident Reporting/Data Management
- Special Projects
- Not Sure
- Preplanning
- Other _____

Please list any special talents or skills.

I have answered all of the above questions honestly and to the best of my ability.

Signature

Date

Parent or guardian signature if applicant is under 18 years of age.

Signature

Date

On behalf of the [Department Name], we would like to thank you for supporting your local fire and emergency services.



For more information please contact [Department/Fire Corps Program Name] at [Email] or [Phone Number].