



Greater Bowen Valley Fire Protection District

P.O. BOX 613
Baker City, OR 97814

20583 Sumpter Stage Hwy
Baker City, OR 97814

Station Phone 541-523-3688

Volunteer Application

Position your applying for:

FIREFIGHTER - Wildland Structure Fire Support * Photographer
 Driver / Operator EMS - Medical Other: _____

*Fire Support includes non-fire scene activities such as support coordinator, station and or vehicle maintenance, post incident restocking and clean-up, station housekeeping, clerical, babysitting, rehabilitation unit (food preparation), and water supply.

Personal Information :		<i>Please print</i>	
Last	First	MI	Are you entitled to work in the United States? <input type="checkbox"/> Yes , <input type="checkbox"/> No Are you 18 or older? <input type="checkbox"/> Yes , <input type="checkbox"/> No
Street Address	City	ST	Zip
Home Phone			Mobile Phone
Email:			
Have you been convicted of a felony or been incarcerated in connection with a felony in the past ten years? ? <input type="checkbox"/> Yes , <input type="checkbox"/> No		If yes, please explain:	
Military Service? <input type="checkbox"/> Yes , <input type="checkbox"/> No Branch		Oregon Driver License Number & Expiration Date	
References: Please provide a personal reference name and contact information:		List any fire fighter Training or experience:	

Applicants may be required to drive on department business and must possess a valid Oregon Driver license. The Department, as a component of Risk Management, may check driver records at any time.

In Submitting this application for a volunteer position, I authorize investigation of all statements contained in it, and it understood and agreed that any misrepresentation by me, in this application may result in cancellation of the application and / or separation from the department. I agree that I will undergo a physical examination, at the departments' expense, if requested by the department.

I certify that I have read all of this application and the information I provided above is true and correct.

Signature

Date

For Department use Only			
Date Received:		Approved by Staff:	Start Date:
Background:		Approved by Board:	