

DEPARTMENT USE ONLY
HIRE DATE
TCFD ID NO.
VENDOR NO.

TUOLUMNE COUNTY FIRE DEPT.

REVISED 9/27/22



VOLUNTEER RESIDENT APPLICATION

APPLICANT INFORMATION

First Name	Last	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Mailing Address		Apartment/Unit #	
City	State	ZIP	
Home Phone	Work Phone	Cell Phone	
E-mail Address			

Preferred Contact Method	Drivers License #	Class	Expires
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Do you have proof of insurance?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please attach a copy of your insurance to application.
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever volunteered for TCFD before?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of any violation of the law? You may eliminate traffic violations less than \$100.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

A conviction record is not necessarily a bar to employment. Each case will be given individual consideration, based on job-relatedness.

EDUCATION

High School	Address		
From	To	Graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
If not, do you have a G.E.D. or Calif. High school proficiency certificate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
College	Address		
From	To	Graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
Other	Address		
From	To	Graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree

Formal Education *Attach copies of any certificates you might have to application.*

Do you have any formal education or vocational training in the fire science, EMS, or related field?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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If yes, explain:

Do you have any other formal education, vocational training or other educational background that you wish us to be aware of?

WORK REFERENCES

Please list three professional references.

Full Name	Relationship
Company	Phone ()
Address	Dates of Employment
Reason for separation	
Full Name	Relationship
Company	Phone ()
Address	Dates of Employment
Reason for separation	
Full Name	Relationship
Company	Phone ()
Address	Dates of Employment
Reason for separation	

PERSONAL REFERENCES

Please list three personal references. Cannot be relatives.

Full Name	Relationship
Mailing Address	Phone ()
Full Name	Relationship
Mailing Address	Phone ()
Full Name	Relationship
Mailing Address	Phone ()

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.
If accepted as a member of the Tuolumne County Fire Department, I agree to faithfully execute the duties of a Volunteer Firefighter, and to comply with all rules and regulations of the Tuolumne County Fire Department.

Signature

Date