

Cranberry Township Volunteer Fire Company 20727 Route 19, Suite 21 Cranberry Township, PA 16066

724-776-6130 membership@ctvfc21.org

Position Applying for (select one):			Date	
☐ Brigade (Firefighter) ☐	Fire Police	☐ Administrative	☐ Ladies Auxiliary	
Last Name:		First Name:	MI:	
Other Names Used:				
Address:				
City:				
Phone: Home:	Work:		Cell:	
E-mail Address:				
Employer:				
Employer Address:				
Position/Occupation:				
Cell Phone Carrier				
Please list any current or previ				
belonged (begin with the most	recent – attach	another sheet if nece	essary).	
Organization:				
Position:				
Dates From:				
Department Supervisor:				
Reason for Leaving:				
Organization:				
Position:				
Dates From:				
Department Supervisor:				
Reason for Leaving:				

Please list any other professional or volunteer experience which may be helpful in your position with the Cranberry Township Volunteer Fire Company, including special training, certifications or other emergency management skills.					
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Education Level (select one): ☐ Some High School	: ☐ High School Diploma	☐ Some College/Currently Enrolled			
Associate's Degree	☐ Bachelor's Degree	☐ Graduate Degree			
School(s) attended:					
Please list any other education	on, or technical or professional tra	ining.			
How did you learn about the	Cranberry Township Volunteer Fire	e Company?			
Emergency Contact					
-		Relationship:			

	Years Known:
	Phone:
State:	Zip:
	Years Known:
	Phone:
State:	Zip:
th and shall be prohible (P.L. 604, No. 61) kit is ship Volunteer Fire Con, employment records may be deemed new orcement agencies, and other types of ke parties from all liability does not discriminately of the period of the period complete to the best of the deep the complete to the best of the period of th	deral or State law shall be prohibited from bited from being certified as a firefighter under nown as the State Fire Commissioner Act. Company is hereby authorized to make I, criminal record, credit history (pursuant to cessary in arriving at a membership decision. and other agencies and institutions, to release background information to Cranberry Township ity for any damage whatsoever that may attend in any membership practice against any national origin, age, disability or any other set of my knowledge. In the event of ven by me in this application, or any
	Date:
nt is under 18):	
	Date:
	Date:
	State:State

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Please provide two non-relatives that can attest to your qualifications and interest in being a



CRANBERRY TOWNSHIP VOLUNTEER FIRE COMPANY

Notification and Authorization to Conduct Volunteer Background Investigation

This is to notify you that we will begin conducting a background check for possible volunteer membership with the Cranberry Township Volunteer Fire Company.

By signing the release below, I hereby authorize the Cranberry Township Volunteer Fire Company to contact any and all corporations, former employers, educational institutions, law enforcement agencies, city, state, county, and federal courts, military services to release information about my background including, but not limited to, information about employment, education, driving record, criminal record and general public records history to the Cranberry Township Volunteer Fire Company.

I release from all liability all persons, companies, schools supplying such information. I indemnify the Cranberry Township Volunteer Fire Company against any liability, which may result from making such requests. This release shall remain in effect for the length of my employment. I understand and I may have a right to request additional disclosures regarding the nature and scope of the investigation.

I believe to the best of my knowledge that all information I have provided is accurate, true and correct and that I fully understand the terms of this release.

Please print Name (Last, First, Middle Initial):				
(Please print) Other names used:				
Address:				
City/State/Zip:				
Home Phone #:	_ Cell Phone #:_			
Date of Birth:				
Social Security #:				
Driver's License Number:		_ State:		
	[Date:		
(Signature of Applicant)				