



# Rockledge Volunteer Fire Company

505 Huntingdon Pike ~ Rockledge, PA ~ 19046 ~ Montgomery County, PA

1) \_\_\_\_\_  
(Last Name) (First Name) (MI)

2) \_\_\_\_\_  
(Address) (Apt)

\_\_\_\_\_  
(City) (Zip)

3) \_\_\_\_\_  
(Home #) (Cell/work)

4) Date of Birth: \_\_\_\_\_  
**If you are under 18 parent/guardian signature required.**

5) How long have you lived at the current address? \_\_\_\_\_

6) If under 1 year, please provide prior address. \_\_\_\_\_  
\_\_\_\_\_

7) If you ever used another name, please explain. \_\_\_\_\_  
\_\_\_\_\_

8) Do you have a valid Pennsylvania Operators License? \_\_\_\_\_  
If yes, provide Operators License Number. \_\_\_\_\_

9) Have you ever been a member of the United States Armed Forces? \_\_\_\_\_

10) If yes to #9, where you less than honorably discharged? \_\_\_\_\_  
Less than Honorable discharge from the military is not an automatic disqualification for membership; however it may require additional investigation and may be considered in our final membership decision.

11) Previous emergency service experience: \_\_\_\_\_  
\_\_\_\_\_

12) Reason for applying for Membership: \_\_\_\_\_  
Members seeking appointment to the active firefighting force are subject to a physical exam by a physician at their own expense.

13) Please indicate your availability to participate in normally required fire company activities including meetings, trainings and fire calls.  
Days \_\_\_\_\_ Evenings \_\_\_\_\_ Nights \_\_\_\_\_

14) Please list three references who have known you for at least three years?

Name: \_\_\_\_\_ contact # \_\_\_\_\_

Name: \_\_\_\_\_ contact # \_\_\_\_\_

Name: \_\_\_\_\_ contact # \_\_\_\_\_

Title 18 Pennsylvania Crimes Code, Section 3301: Arson and related offenses, section (h.1) "Prohibition on certain service.--A person convicted of violating this section shall be prohibited from serving as a member of a volunteer firefighter company and shall be prohibited from being certified as a firefighter under section of the act of November 13, 1995 known as the State Fire Commissioner Act."

**Conviction of a Felony, other than Arson, although not an automatic disqualification for membership, will require additional investigation and consideration by the Board of Directors.**

15) Have you ever been convicted or plead guilty to a Felony?

\_\_\_\_\_

16) Recommended by (Company member in good standing): \_\_\_\_\_

PRIVACY:

The Rockledge Volunteer Fire Company #1, will utilize the above information to conduct a background investigation which will be used in consideration for membership. This background investigation includes a criminal background check conducted by the Rockledge Borough Police Department and or other established law enforcement agencies. Your signature below authorizes these law enforcement agencies to conduct such checks and provide the results of these checks to those members of the Rockledge Volunteer Fire Company #1 charged with membership application review. This information will be utilized for membership application and personnel files only and will not be released to other entities. The results may be kept on file for duration of membership and for at least 1 year if application for membership is denied. Failure to provide correct information or authorization will result in your application not being considered for membership.

Applicants signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name & Signature: \_\_\_\_\_

Date read for 30 days: \_\_\_\_\_ Date voted on: \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Company member conducting review: \_\_\_\_\_