## **TOWN OF ERIN FIRE & EMERGENCY SERVICES**

5684 Trafalgar Road, Hillsburgh, ON N0B 1Z0 519-855-4407 Ext. 262

## **Application for Volunteer Fire Fighter**



**Instructions:** Please provide the information requested on this form and attach a resume. **Personal Information:** Email Address: Initial Last Name First Name Address: Street, PO Box, Rural Route Apt. Number City/Town Province Postal Code Telephone: Home Work Cell Current Class of Drivers License: **Coverage Area:** In order to qualify as a volunteer fire fighter you must live in the coverage area. Please indicate the fire station you are applying for: Station 10 – Erin Station 50 - Hillsburgh **Education and Training** Secondary School Last Grade Completed: \_\_\_\_\_ Year Completed: \_\_\_\_\_ **Additional Education and Training:** Name of School # of Years Major & Degree Type Location Completed Or Training Facility

Qualifications			Yes	No
Do you volunteer within the community?				
Do you have 20/30 corrected vision with colour and peripheral vision acceptable for the occupation of firefighter?				
Do you have normal unaided hearing – hearing thresholds no greater than 30 decibels in each ear at 500Hz, 1000Hz and 2000Hz and no significant loss in higher frequencies?				
Special Abilities:				
Employment History: Please list your work experience beginning with your most recent job held:				
Name of Current Employer	Name Supervisor:	Employment Dates:		
Address		From:		
City/Province	Your Job Title:	To:		
Phone No.	<u> </u>			
Reason for leaving (be specific):				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this organization.				
Name of Employer	Name of last Supervisor:	Employment	Dates:	
Address		From:		
City/Province	Your Job Title:	То:		
Phone No.	<u> </u>			
Reason for leaving (be specific):				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this organization.				