APPLICATION FOR MEMBERSHIP TO THE WATERFORD FIRE DEPARTMENT



INFORMATION	Name: (last) (mid	dle) (first)
Print clearly, especially e-	Address:	
mail!	Phone:	
	Are you a Veteran? Yes	No 🗌
	e-mail:	
EDUCATION & TRAINING	(name of last school attended)	(dates)
	(address)	
	(city) (state	e) (zip)
	Indicated highest education level achieved: ☐ Elementary / Middle School ☐ High S	chool Two-year college
	☐ Four-year college ☐ Gradua	ite degree
	List relevant courses, certifications, diplomas, degrees or licenses:	
	Other training or skills (firefighting, first aid,	driving, etc. – included military)
PREVIOUS EMS / FIREFIGHTING EXPERIENCE		
EMPLOYERS	Start with present position and work back:	
	(name of firm) (job	title)
	Sum	mary of duties
	(city) (state)	
-	Employed from to (month, year)_	(month, year)
	May we contact this employer?Yes [
	Employer Phone Number:	