



# Derby Fire Department

1 Elizabeth Street  
Derby, Connecticut 06418  
(203) 736-1473



## Derby Fire Department Membership Application

Date: \_\_\_\_\_

Application Type:  Regular  Under 18 Years Old  Fire Police

### Applicant Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_ Endors/Restr: \_\_\_\_\_

Email Address: \_\_\_\_\_

Company Applying To:  Hotchkiss Hose Co. 1  Storm Engine Co. 2  East End Co. 3  Paugassett H&L Co. 4

State / National Certifications (e.g. FF-1, FF-2, MRT, EMT): \_\_\_\_\_

Previous Experience (Departments, Organizations): \_\_\_\_\_

Past Residences (Other than above listed, including dates): \_\_\_\_\_

Criminal History? Explain: \_\_\_\_\_

### Emergency Contact Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Relation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

### Applicant Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian Signature (applicants under 18): \_\_\_\_\_ Date: \_\_\_\_\_

*By signing this application I attest that the facts herein contained are true and correct, and knowing that any false statement is subject to prosecution under the penalties of Connecticut State Statute 53a-157b, I also allow the Derby Fire Department permission to perform background checks, view driving records, and criminal history reports on myself to determine the validity of the information. This information may or may not preclude any individual applicant from becoming a member of the Derby Fire Department. **Initials:** \_\_\_\_\_*

# Derby Fire Department Membership Application Additional Information

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

## Administrative

Date Application Received: \_\_\_\_\_ Company: \_\_\_\_\_

Date Chief's Office Received: \_\_\_\_\_ Received By: \_\_\_\_\_

Background Check Completion Date: \_\_\_\_\_ Reviewed By: \_\_\_\_\_

Issued Fire Department Identification Number (FDID): \_\_\_\_\_

Pager #: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Helmet: \_\_\_\_\_ Model: \_\_\_\_\_ Hood: \_\_\_\_\_

Bunker Coat: \_\_\_\_\_ Chest: \_\_\_\_\_ Arm Length: \_\_\_\_\_

Bunker Pants: \_\_\_\_\_ Waist: \_\_\_\_\_ Leg Length: \_\_\_\_\_

Gloves: \_\_\_\_\_ Size: \_\_\_\_\_

Boots: \_\_\_\_\_ Size: \_\_\_\_\_

Medical Physical Date: \_\_\_\_\_

Policy & Procedures Manual Received: \_\_\_\_\_ Date: \_\_\_\_\_ Member Initials: \_\_\_\_\_

Date Member Accepted: \_\_\_\_\_ Company: \_\_\_\_\_

Chief Officer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Statistics

How applicant heard about the Derby Fire Department:

Friend     Website     Flyer     TV Advertisement

Other: \_\_\_\_\_