



## **POULSBO** FIRE DEPARTMENT

911 NE LIBERTY RD, POULSBO, WA 98370  
Telephone (360) 779-3997 Fax (360) 779-4699  
[www.poulsbofire.org](http://www.poulsbofire.org)

### *Our Vision*

*To build upon the community's trust in us to protect their family, neighbors, and property as we would our own.*

## **Volunteer Program Application Packet**

### **Minimum Requirements**

- 18 years of age
- Possess a high school diploma or a GED
- Possess a valid driver license
- Pass a background investigation, driving record review, medical evaluation, psychological exam
  - See next page for automatic/potential disqualifiers
- Ability to read and write the English language

### **Participation Requirements**

- Chaplain
  - Attend monthly meetings
  - Bi-weekly training sessions
  - Complete mandatory chaplain training academy

### **Application and Selection Process**

- Keep this and the following page for your records.
- If you have a change in telephone number, physical address or email address, *please* contact the office to update your application. Applicants will be contacted from the information *you* provide on the completed application.
- The Fire Chief may conduct a final interview
- Driving/background investigations will be conducted
- Medical/physical exams will be conducted
- Your application status and next steps will be communicated via email; please keep an updated email on file.



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THE FOLLOWING ARE ***AUTOMATIC AND POTENTIAL DISQUALIFIERS***. APPLICANTS SHOULD NOT APPLY TO OUR AGENCY IF THEY INDICATE ANY OF THE AUTOMATIC DISQUALIFIERS. POTENTIAL DISQUALIFIERS WILL BE CONSIDERED ON A CASE BY CASE BASIS.

<b>Driving</b>	Automatic	1 or more traffic crime convictions in last 5 years (DWI, Suspended, Reckless, etc.)
	Automatic	3 or more moving violations or a suspended license in past 3 years.
	Potential	Driving Records that indicate a pattern of infractions will be reviewed on a case by case basis and may be forwarded to our insurance provider to confirm compliance with policy requirements. All drivers subject to WSP driving record check.
<b>Drug Usage</b>	Automatic	No illegal sale of ANY drug, including marijuana.
	Automatic	Pattern of illegal use of prescription medication.
	Potential	All members are subject to drug testing.
<b>Criminal Activity</b>	Automatic	Any adult felony conviction.
	Potential	Adult misdemeanor convictions will be carefully reviewed.
	Potential	Juvenile felony convictions will be carefully reviewed.
	Automatic	Convicted of any crime under a domestic violence statute.
	Automatic	Unlawful sexual misconduct.
	Potential	All members are subject to thorough background investigations prior to joining the organization.
<b>Employment</b>	Automatic	Lied during any stage of the hiring process.
	Automatic	Falsified his or her application, or any other forms during the application process.



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## Volunteer Application

Date Received (office use only)

### Instructions

- Complete, electronically or legibly in blue or black ink.
- Follow the directions. Illegible, incomplete or incorrectly completed applications will not be considered.
- DO NOT LEAVE ANY ITEM BLANK. If an item does not apply, write "N/A" (not applicable).
- If you need additional space, attach a separate piece of paper with acceptable documentation including your name and the specific section of this application you are continuing.
- You may also attach copies of resumes, documents, or certificates which support your application. All materials submitted become the property of Poulsbo Fire Department and will not be returned.
- All statements made on the application are subject to verification.
- Sign the last page of the application affirming the information provided is true and correct.

What position are you applying for?      Chaplain

How did you learn about our program?

Please check one: PFD website      Walk-in      Friend      Social Media      Other

### Information

Name (Last, First, MI)	
Physical Address	
City, State ZIP Code	
Home Phone	
Work Phone	
Cell Phone	
E-Mail Address	

	Yes	No
Are you 18 years or older?		
Are you legally eligible to work in the United States?		
IF selected, do you agree to serve the District as a volunteer with no expectation of pay or other remuneration of services provided to the District?		

## References

Please list 4 references that are not relatives or previous employers.

Name: \_\_\_\_\_ Years known: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Years known: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Years known: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Years known: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship: \_\_\_\_\_

## Background History

Have you ever been convicted of a crime?                      YES              NO

If yes, explain conviction(s), date of such offense(s), city/county/state convicted:

State	Month/Year	Conviction/Details

Do you possess a current driver's license?                      YES              NO

List any accidents, infractions or traffic citations which you have received in the past 7 years.

State	Month / Year	Type of Infraction/Details

Convictions, infractions or citations will not necessarily remove you from consideration, but Poulsbo Fire will consider your background, driving record and insurability when making selections.

## Employment Experience

Resumes may be attached but will not be accepted as a substitute for completing this section. Start with your present or last job. Include any job related military service assignments and volunteer activities for the past seven (7) years. Please include periods of self-employment and U.S. military service.

Job Title:	From:	To:
Name of Business and Address:	Supervisor	
Phone #:	Hours worked per week:	
Number of employees supervised by you:	May we contact this employer?	
Reason for leaving:		
Primary duties:		

Job Title:	From:	To:
Name of Business and Address:	Supervisor	
Phone #:	Hours worked per week:	
Number of employees supervised by you:	May we contact this employer?	
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List any job pertinent skills or specialized training:

List extracurricular activities and hobbies:

List Accomplishments:

Describe why you want to volunteer for the Poulsbo Fire Department:

Indicate any foreign languages you can speak, read and/or write:

	FLUENT	DECENT	FAIR
SPEAK			
READ			
WRITE			

State any additional information you feel may be helpful to us in considering your application:

The Poulsbo Fire Department is an Equal Opportunity Employer. We hire, train and promote without discrimination due to race, color, religion, gender, national origin, ancestry, marital status, age, sexual orientation or disability.

**I certify that the information contained in this application is true, complete, and correct. I understand that false, misleading, or exaggerated statements are considered sufficient cause for dismissal of my application and/or termination in this process.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_