

Town of Vegreville ** Fire Department
Application for Firefighter



Name: _____

Address: _____

Phone: _____ Work: _____

DOB: D____ M____ Y____ Marital Status: _____

SIN: _____

Drivers License#: _____ Class: _____

Are you bondable: Yes No

Previous Fire/Emergency experience and/or training: _____

List three personal references including name, address and daytime phone number.

1. _____

2. _____

3. _____

**** For Office Use Only ****
Acceptance as Probationary Fire fighter

Fire Chief: _____ Officer: _____

Date: _____ Date: _____

Acceptance as a Regular Firefighter

Fire Chief: _____ Date: _____

I do hereby declare that should I be successful in my application for membership within the Town of Vegreville – Fire Department, I will obey and abide by the rules and regulations as set forth in the Fire Department Standard Operating Guidelines manual. I understand that failure to comply with rules will result in disciplinary action.

Applicant (printed name): _____

Applicant (Signature): _____ Date: _____