



Village of Los Ranchos de Albuquerque Fire Department



345-9148
6718 Rio Grande Blvd. N.W.
Los Ranchos de Albuquerque, New Mexico 87107

APPLICATION FOR VOLUNTEER FIRE DEPARTMENT

Date _____

PERSONAL DATA

Name: _____ Social Sec. # _____ - _____ - _____
Last First Middle

Date of Birth: ____/____/____ Age: _____ Sex: M ____ F ____

Height: ____ ft. ____ in. Weight: _____

Present Address: _____
Street City State Zip

How Long At Present Address: _____ Phone #: _____

Previous Address: _____
Street City State Zip

How Long at Previous Address: _____ Number of Dependents: _____

BACKGROUND INFORMATION

Have you ever been bonded? [] No [] Yes - When _____

Have you ever been convicted of a crime? [] No [] Yes - Explain _____

List any and/or all traffic violations in the past three (3) years: including DWI's & DUI's:

SKILLS

List any and/or all special skills you have that would be of value to the Fire Service: _____

Have you ever been a member of another Fire Department? [] No [] Yes - When/Where: _____

LIST IN REVERSE ORDER BEGINNING WITH PRESENT EMPLOYER 1. COMPANY NAME 3. CITY/STATE/ZIP 2. ADDRESS 4. CONTACT & PHONE		PRESENT/PREVIOUS EMPLOYER DATA					
		POSITION	DATES		SALARY		REASON FOR LEAVING
		JOB/TITLE	FROM	TO	BEGINNING	ENDING	
1							
2							
3							
4							
1							
2							
3							
4							
1							
2							
3							
4							

REFERENCES: _____ May we contact the employer at the number given?
 Yes No

EDUCATION INFORMATION				
NAME AND LOCATION OF SCHOOL	CIRCLE LAST GRADE COMPLETED	GRADUATED	MAJOR/DEGREE	G.P.A.
	1 2 3 4 5 6	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	6 7 8 9	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	9 10 11 12	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	13 14 15 16	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	<input type="checkbox"/> VOCATIONAL <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> ACADEMIC	<input type="checkbox"/> YES <input type="checkbox"/> NO		

PERSONAL REFERENCES			
NAME	ADDRESS	RELATIONSHIP	PHONE #

APPLICANT: READ AND SIGN BELOW

The information provided by me in this application for employment is true and complete to the best of my knowledge. I understand that if I am employed, any false statements will be considered as cause for possible dismissal. You are hereby authorized to conduct any investigation of my personal history and/or credit and financial records employing investigative or credit agencies or bureaus of your choice, subject to the provisions of the Fair Credit Reporting Act.

SIGNATURE OF APPLICANT DATE

INTERVIEWER	DATE	COMMENTS