



# Huxley Fire & Rescue

104 E. Railway (Physical)  
515 N. Main Ave (Mailing)  
Huxley, Iowa 50124

## Member Application Package

Thank you for your interest in becoming a member of Huxley Fire & Rescue. Volunteering is very demanding. It takes a lot of time, effort, and can be emotionally stressful. Please be sure that you can meet the commitment before you apply.

Please follow these steps to apply:

1. Fully complete the application
2. Sign the Certification and Agreement Form
3. Sign the Huxley Fire & Rescue Service Commitment
4. Attach a copy of your Driver's License
5. Attach a copy of all your certifications, CPR card, and any other relevant training records
6. Direct any questions to Chief Woodbeck at [firechief@huxleyiowa.org](mailto:firechief@huxleyiowa.org).
7. Attach any supporting documents you feel necessary, i.e. letter of reference
8. Return the completed application package to:

Fire Chief Travis Woodbeck  
515 N. Main Ave  
Huxley, Iowa 50124

Huxley Fire & Rescue does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, gender, marital status, national origin, disability or handicap, veteran status, or any other protected status.

# Huxley Fire & Rescue Member Application

## Personal:

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
                     First                                      Last                                      Middle

Address: (Number & Street) \_\_\_\_\_  
                     (City, State, Zip Code) \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ Evening Phone Number: \_\_\_\_\_

Desired start date: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Are you over 18 years old?   \_\_\_ Yes \_\_\_ No

## Education:

School	Years Completed (circle one)	Diploma/Degree Earned	List School(s), City/State
High School	1 2 3 4	Diploma: __ Yes __ No G.E.D.: __ Yes __ No	
College and/or Vocational School	1 2 3 4		
Other Training or Degrees			

### Fire Certification (If you are not certified, please leave blank):

**Attach Copy of All Certification(s)**

Type of Certification(s) Held: \_\_\_\_\_

Professional Membership(s): \_\_\_\_\_

### EMS Certification (If you are not certified, please leave blank):

**Attach Copy of All Certification(s)**

Type of Certification(s) Held: \_\_\_\_\_

Iowa Certification Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Professional Membership(s): \_\_\_\_\_

**Record of Conviction:**

Have you ever been convicted of a crime other than minor traffic offense?  Yes  No

If yes, fully explain: \_\_\_\_\_

\_\_\_\_\_  
*(A conviction will not necessarily automatically disqualify you for membership. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered).*

**Employment:**

**Please list your current employer (including U.S. Military Service), if any employment was under a different name, indicate name.**

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Dates of Employment: 

From	To
(Mo/Yr)	(Mo/Yr)

 \_\_\_\_\_

Supervisor: \_\_\_\_\_ Department: \_\_\_\_\_

(Circle one) FT PT No. of Hrs. per Week: \_\_\_\_\_

Duties: \_\_\_\_\_

Have you ever been an applicant or member of any fire or rescue agency?  Yes  No

If so, please state agency name, location, contact information, and dates of membership \_\_\_\_\_

\_\_\_\_\_

Please describe any additional work experience, volunteering, community involvement, or training: \_\_\_\_\_

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## References:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Relation: \_\_\_\_\_

## Applicant's Certification and Agreement

- ▶ I hereby certify that the facts set forth in the above application are true and complete to the best of my knowledge. I authorize Huxley Fire & Rescue, its Officers, and/or the City of Huxley to verify their accuracy and to obtain reference information by contacting educational institutions, references or employers, and to rely on and use such information as they see fit.
- ▶ I hereby release Huxley Fire and Rescue, its Officers, members, and the City of Huxley from any/all liability of whatever kind and nature that, at any time, could result from obtaining and having a membership decision based on such information. This application and all information obtained is the property of Huxley Fire & Rescue.
- ▶ I understand that, if granted membership, falsified statements of any kind or omissions of facts called for on this application, regardless of the time of discovery, shall be considered sufficient basis for dismissal.
- ▶ I understand that should an offer of membership be extended to me and accepted that I will fully adhere to the policies, rules and regulations of the department. However, I further understand that neither the policies, rules, regulations of membership, nor anything said during the interview process shall be deemed to constitute the terms of an implied contract for continued membership. I understand that any membership is for an indefinite duration and at will and that either I or the department may terminate my membership at any time with or without notice or cause.
- ▶ I understand that if I am offered membership, membership is conditioned upon my providing such other and further information as may be required by Huxley Fire & Rescue, its Officers, and/or the City of Huxley.

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Signature of Applicant

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Date

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Printed Name of Applicant

**Department Use Only: Do not write in this space.**

Application received by:	
Date application received:	Date of interview:
Date voted to membership:	Six months probation end date:

## Service Commitment

I hereby commit to:

Provide volunteer on-call and/or paid service including days, nights, weekends, and holidays and agree to meet the minimum attendance requirements as established by Huxley Fire & Rescue.

Attend required monthly business meetings and trainings.

Maintain Fire/EMS certifications and complete all minimum training requirements.

Comply with the standard operating guidelines, policies and procedures of the department, and the direction of the command staff at all times.

Maintain patient confidentiality.

Provide exceptional public service to the best of my abilities to the City of Huxley and surrounding communities.

I understand membership is at-will, and may be terminated at any time with or without justifiable cause by Huxley Fire & Rescue, its Officers, and or the City of Huxley.

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Signature of Applicant

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Date