



APPLICATION FOR MEMBERSHIP
SALINA FIRE DEPARTMENT
90 North 100 West
Salina, Utah 84654

Name: _____
Last First M.I.

Phone: _____

Address: _____

City, State, Zip

Birthdate: _____

Email: _____

Emergency Contact: _____

Phone #: _____

Employment: _____

Employer Address: _____

Will your employer allow you to leave work and respond to a Fire Page? Yes No

Previously a Member of the Fire Service? Yes No Location: _____

Have you ever been dismissed or refused membership into another Fire Department? Yes No

List any previous Fire, EMS, or other Emergency Management Training and Certifications:

Please explain why you would like to become a member of the Salina Fire Department:

Do you agree to submit to a background check and/or drug test? Yes No

If so, please provide the following: Social Security Number: _____
Drivers License Number/State: _____ / _____

By signing this application, I agree to allow the Salina Fire Department and its officers to do a Background Check and search my Criminal History and/or Driving Record.

Have you ever been convicted of:

- A sex related crime which involved force or minors? Yes No
- A crime involving violence or the threat of violence? Yes No
- A crime involving drugs or alcoholic beverages? Yes No
- Any other conviction other than a minor traffic violation? Yes No
- Have you ever been convicted of, received a diversion for, or received a plea in abeyance, for any offense other than a minor traffic violation? Yes No
- Have your ever been convicted of, plead guilty, plead no contest, or sentenced for any other offense? Yes No

*If you answered yes, please provide an explanation of the circumstances, charges, and disposition:

I hereby verify that all information given in this application is true and correct to the best of my knowledge and do authorize the Salina Fire Department to verify the information on this application.
I agree to appear before the members of the Salina Fire Department for a personal interview.

Printed Name: _____

Signature: _____

Date: _____