



GLASTONBURY FIRE DEPARTMENT
2155 Main Street
Glastonbury, CT 06033
(860) 652-7555



APPLICATION FOR MEMBERSHIP

INSTRUCTIONS TO APPLICANT:

The Glastonbury Fire Department is a department within the Town of Glastonbury. The Town of Glastonbury and the Glastonbury Fire Department are Equal Opportunity Employers. Residents of the town, nonresidents gainfully employed within the town, and persons living in other towns with the ability to respond to emergencies in a timely fashion, are eligible for membership.

These instructions outline the application procedure:

All items must be complete. If an item is not applicable, please enter "N/A".

All personal reference addresses must be complete. Please include street number, street name, town and zip code.

Any incomplete item(s) will result in the application being return to the applicant for completion and resubmission. This will cause a delay in processing the application.

The Department will conduct a criminal and motor vehicle background check on an applicant.

An applicant will be required to complete a fit for duty physical.

False and/or incorrect information may be grounds for rejections of an application or subsequent dismissal from the Department.

A copy of a valid Connecticut driver's license is required.

Upon review of your application, the Department will send you a detailed letter with additional information pertaining to the application process.

APPLICANTS MUST COMPLETE ALL OF THE FOLLOWING:

Last Name	First Name	Middle Initial	
Date of Birth	Home Phone	Work Phone	E-Mail Address
Street Address		Town	Zip Code
Years at This Address		If Less Than One Year, Give Prior Address	
Name of Emergency Contact		Address (if different)	
Telephone Number:			

MILITARY RECORD AND STATUS

Branch of Service	Dates served: _____ To _____
Type of Duty	Special Training Received

MUST HAVE A HIGH SCHOOL DIPLOMA OR EQUIVALENT OR HAVE REACHED THE AGE OF 21

EDUCATION AND TRAINING:

Name of High School: _____

Address of School: _____

Years completed: _____ Diploma Received: Yes _____ No _____

College or Technical School:

Name: _____

Address: _____

Type of Degree Received: _____ Completed Degree: Yes _____ No _____

College or Technical School:

Name: _____

Address: _____

Type of Degree Received: _____ Completed Degree: Yes _____ No _____

List any other educational qualifications, special qualifications and skills or certifications not indicated above

_____	_____
_____	_____
_____	_____
_____	_____

EMPLOYMENT RECORD: List your last ten years of employment experience, including self-employment, summer, part-time, full-time military service and any work performed on a volunteer basis. Start with the present or most recent employer:

1) Employer: _____

Address: _____

Immediate Supervisor: _____ Phone Number: _____

Job Title: _____ Dates of Employment: _____ to _____

Description of Duties: _____

Full or Part-Time: _____ Reason for leaving: _____

2) Employer: _____

Address: _____

Immediate Supervisor: _____ Phone Number: _____

Job Title: _____ Dates of Employment: _____ to _____

Description of Duties: _____

Full or Part-Time: _____ Reason for leaving: _____

3) Employer: _____

Address: _____

Immediate Supervisor: _____ Phone Number: _____

Job Title: _____ Dates of Employment: _____ to _____

Description of Duties: _____

Full or Part-Time: _____ Reason for leaving: _____

Have you ever belonged to a Fire/EMS organization? Yes _____ No _____

Department/Agency Name: _____

Address: _____

Phone Number: _____

Job Title: _____ Immediate Supervisor: _____

Dates of participation: _____ to _____

Description of duties: _____

Reason for leaving: _____

Are you willing to have your present employer contacted regarding your qualifications and work performance?

Yes _____ No _____. If no, please explain: _____

REFERENCES: Please provide three (3) persons, other than relatives, who are familiar with your character, job qualifications and work performance to provide information about you (be sure to include complete address and phone numbers of references).

1) _____
(Name) (Address) (Phone)

2) _____
(Name) (Address) (Phone)

3) _____
(Name) (Address) (Phone)

REMARKS: Use this space for any additional information or for continuation of answers to previous questions. Refer to questions by section.

How did you hear about us? _____

CERTIFICATION:

- a) I certify that there are no misrepresentations, omissions or falsifications in the foregoing statements and answers, and that the entries above made by me are true, complete and correct to the best of my knowledge and belief. I understand that non-compliance with this certification will result in rejection of my application or, if I am already a member, immediate discharge from the Glastonbury Fire Department.
- b) In the event that Glastonbury Fire Department recruits me, I agree to comply with all of its orders, rules and regulations. The Town of Glastonbury makes no guarantee of employment. Only the Town Council and Town Manager may enter into an employment contract and then, only in a written agreement signed by all parties.
- c) Failure to follow directions and complete all sections of this application is grounds for immediate dismissal from the recruitment process.
- d) The Town of Glastonbury reserves the right to conduct pre-employment drug and alcohol testing of all applicants. Failure to pass the test will result in the withdrawal of any offer of employment. Applicants for safety sensitive positions will become participants in the Town of Glastonbury's Drug and Alcohol Testing Program.

(Signature)

(Print Name)

(Date)

THIS SECTION TO BE COMPLETED BY GLASTONBURY FIRE DEPARTMENT

Application received by:	of Co.#	Date
Application sent to Company Captain		Date
Applicant interviewed by Application Committee		Date
Interviewed by_____ Acceptable	Yes	No
Interviewed by_____ Acceptable	Yes	No
Interviewed by_____ Acceptable	Yes	No
Interviewed by_____ Acceptable	Yes	No
Interviewed by_____ Acceptable	Yes	No
Recommendation by Application Committee: Accept	Reject	
Applicant's Name Warned to Membership	Date_____	
Applicant Voted by Command Staff	Date_____	
Results of Vote: Yes	No_____ Applicant was Accepted	Not Accepted

AUTHORIZATION FOR RELEASE OF INFORMATION
GLASTONBURY FIRE DEPARTMENT BACKGROUND CHECK

I, _____, do hereby authorize a review of and full disclosure of all records or any part thereof, concerning myself, by and to the Glastonbury Fire Department whether said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions, employment and pre-employment records, including background reports, complaints or grievances filed by or against me, records of complaints, arrest, trial and/or conviction of alleged or actually violations of the law, including criminal and/or traffic records; records of complaints of a civil nature made by or against me, where over located, and to include the records and recollections of attorney-at-law or of other counsel, whether representing me or another person in any case in which I presently have or have had an interest.

It is the intent of this authorization to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation, which may provide pertinent data for the Glastonbury Fire Department to consider in determining my suitability for employment with the Town of Glastonbury. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be, and the sources of information specifically enumerated above are not intended to deny access to any records not specifically mentioned herein.

I understand that any information obtained by the personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization, will be considered in determining my suitability for employment by the Glastonbury Fire Department.

A photocopy of this release will be valid, as an original hereof, even though the said photocopy does not contain an original writing of my signature.

Signature: _____

Address: _____

DOB: _____

Soc. Sec#: _____

Date: _____

Witness: _____

Town of Glastonbury
Applicant Affirmative Action Self Identification Form

Required Information

Name: _____ Date of Application: _____

Position for which you are applying: _____

Voluntary Information

The Town of Glastonbury requests that each applicant complete the following questions so we can comply with the regulations for equal employment opportunity and affirmative action (EEO/AA), we must track our applicants by gender and race/ethnicity by position applied for. For this reason, we invite you to complete the information below. This information will be kept separate from your application.

Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. Responses will remain confidential within the Human Resources Department; and will be used only for the necessary information to include in our Affirmative Action Program and reporting requirements to the government. When reported, data will not identify any specific individuals.

Gender: Male Female

Definitions of race/ethnicity are on the reverse side (as defined by the Equal Employment Opportunity Commission).

Race/Ethnic Identification (check one):

Are you Hispanic or Latino? Yes No

If you answered "Yes" you have completed this form. If you answered "No" please select a race from the options below.

White (Not Hispanic or Latino)

Black or African American
(Not Hispanic or Latino)

Native Hawaiian or Other Pacific Islander
(Not Hispanic or Latino)

Asian (Not Hispanic or Latino)

American Indian or Alaska Native
(Not Hispanic or Latino)

Two or More Races (Not Hispanic or Latino)

I do not wish to disclose.

Definitions of race/ethnic categories

Hispanic or Latino – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino) – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (Not Hispanic or Latino) – A person having origins in any of the black racial group of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino) – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino) – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino) – All persons who identify with more than one of the above five races.