



Spring Hill Fire Department

400 Campbell Station Pkwy, Spring Hill, TN 37174

Fire@springhilltn.org

615-302-0612

Membership Application

READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS APPLICATION:

Type or print your application in black ink. All sections MUST be answered completely and accurately.

An incomplete application may disqualify you.

Name _____
Last First Middle

Mailing Address _____
City State Zip

Home Phone _____ Work Phone _____ Social Security # - -

Emergency Contact Number _____ Name _____ Relation _____

Do you possess a valid TN driver's license? Yes ___ No ___

Driver's license number. _____

Are you over the age of 18? Yes ___ No ___

Are you a U.S. citizen? If not do you have the legal right to remain permanently in the U.S.?
Yes ___ No ___

Have you been convicted of a felony in the last 7 years? Yes ___ No ___

Please explain if you marked Yes in the above question. _____

Did you serve in the U.S. military? If yes please provide a copy of your DD-214. Yes ___ No ___

Please check any of the following qualifications that you may possess.

Firefighter I _____	First Responder _____	Pumps I _____	Haz-mat Tech _____
Firefighter II _____	EMT _____	Pumps II _____	Haz-mat Specialist _____
Rookie School _____	EMT IV _____	Pumps III _____	Extrication _____
Trench Rescue _____	EMT - P _____	Swift Water _____	EVOC _____
Fire Apparatus Operator _____	Other fire related qualifications: _____		

Check any of the following software packages that you are skilled in.

Microsoft Word _____	Excel _____	Power Point _____	Adobe _____
CAD _____	Fire Zone _____	RMS _____	

Describe any job related skills, knowledge or special training that you may hold. _____

Education/Training

**** Submit verification of your college education such as copies of your diplomas or transcripts with application. ****

Education equivalent to the completion of the 12th grade? Yes _____ No _____

College/University/Trade School or Special Training	Course of Study or Major	Type of Degree or Certification

Employment History

List your last (3) employers, assignments or volunteer activities, starting with the most recent or current, including military experience.

Employer: _____ Telephone: _____
Address: _____
Job Title: _____ Dates Employed: _____
Summary of Duties: _____

May we contact this employer for a reference? Yes _____ No _____

Employer: _____ Telephone: _____
Address: _____
Job Title: _____ Dates Employed: _____
Summary of Duties: _____

May we contact this employer for a reference? Yes _____ No _____

Employer: _____ Telephone: _____
Address: _____
Job Title: _____ Dates Employed: _____
Summary of Duties: _____

May we contact this employer for a reference? Yes _____ No _____

Have you ever been terminated from a position? Yes _____ No _____
If yes, why? _____

References

List three names that are not related to you and are not previous employers.

NAME	TELEPHONE NUMBER	YEARS KNOWN

What motivates you to be a Spring Hill Fire Department Firefighter?

What can the Spring Hill Fire Department expect from you?

What do you expect from the Spring Hill Fire Department?

What are the core values? Explain what each value means to you. (for existing members only)

Describe yourself in the least amount of words.

In what situations would you be tempted to lie?

If asked would you take a random drug/alcohol test?

The Spring Hill Fire Department has a zero tolerance against the consumption of drugs/alcohol at any fire department function or emergency scene. If you are in violation of this policy you will be terminated without any questions do you understand?

Have you ever been in an emergency situation? Tell us what you did.

The application is but one part of the membership process. Other parts of the process may include an interview with the Chief, Assistant Chief and a panel of members both volunteer and paid, also a physical agility test may be performed annually. If you need an accommodation in order to complete any part of the membership process, please contact the Chief.

I _____, certify that, to the best of my knowledge and belief, all of the information and statements provided by me in and with this application are true, correct and are provided in good faith.

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and or separation if I have been accepted.

I give the Spring Hill Fire Department the right to investigate all references and to secure additional information about me. I consent to the release of information about my ability and fitness for membership by employers, schools, law enforcement agencies and other individuals and organizations. I hereby release from liability the Spring Hill Fire Department and it's representatives for seeking such information and all persons, corporations or organizations for furnishing such information.

Signature of applicant: _____ Date: _____