



Hartsel Fire Protection District

Member Application

Founded in January 1970, Hartsel Fire & Rescue provides fire suppression, vehicle rescue, technical rescue, and non-transport emergency medical services. We serve residential, commercial, wildland, and highway exposures in a roughly 750 square mile area in Park County. Additionally, we provide assistance to neighboring fire departments, such as Jefferson/Como, Northwest, Lake George and Guffey.

Benefits to Our Volunteers

As a volunteer member of the Hartsel Fire Protection District, you will have the honor of serving your community in emergency situations. Additionally, all members have the opportunity to meet and work with other highly trained, motivated and enthusiastic volunteers and interact with numerous local, state and national fire and rescue organizations.

Other opportunities for our members include:

- Participation in department and community functions
- Fire and rescue-related training provided at no cost to the members
- Pension benefits upon completing 10 years of active service and reaching the age of eligibility
- Worker's compensation coverage while training and performing firefighting duties
- Medical, disability, and life insurance coverage if injuries or death occur while training or performing firefighting duties
- Propane Discount thru Districts vendor, when available
- One set of tires at state bid pricing per year

Criteria for Membership

Application for membership requires that you:

- Be at least 18 years of age
- Be in good health and good physical condition
- Have no felony convictions
- Have a valid driver's license and automobile insurance
- Reside within the boundaries of the Hartsel Fire Protection District

If you are accepted as a volunteer member of the department, you will be a trainee member until you meet the following requirements:

- Successful completion of:
 - A new fire fighter orientation
 - A four-hour cardiopulmonary resuscitation (CPR) course
 - 16 hours of fire department training
 - Wildland S 130/190 L180 courses
 - FEMA ICS 100, 200, 700, 800
- Approval for active membership by the Hartsel Fire Protection Chief after a thorough background check
- Participation in at least 25 calls

Once you have attained active membership status, you must maintain it by:

- Participating in a minimum of 36 hours of training annually
- Participating in various department events
- Carrying a department-provided radio to receive emergency alarms
- Completing a minimum of 10% of calls per year
- Keeping all certifications current by attending required training

Equipment

Upon acceptance as a volunteer member, the Department will provide you with a radio and personal protective equipment (PPE) for responding to calls. Radios and PPE are the property of the Department and must be returned should you no longer be an active member of Hartsel Fire Protection District. Standard structural PPE includes a helmet, eye protection, bunker pants, coat, boots, a nomex hood and gloves. Wildland PPE includes a shirt, pants, helmet, boots, gloves and eye protection. Additional PPE may be provided as necessary.

Application Process

To apply for membership with HFPD, submit the following:

- Completed application
- Photocopy of your driver's license
- Emergency Contact Form
- Completed "Authorization to release information" form
- List of your Current Fire or EMS Certifications

When you sign and submit this application, you are authorizing Hartsel Fire to obtain a background report about your criminal, credit, education and employment history in order to properly evaluate your application for volunteer membership.

A response to your application for membership will be made to you by the Fire Chief.

Member Application

PERSONAL DATA			
Last Name	First Name	Middle Initial	Social Security #
Alias or Previous Name (if any)			
Home Phone Number	Work Phone Number	Cell Phone Number	Pager Number
e-Mail Address		Driver's License Number	
Spouse's Name		Children's Names	
EMERGENCY CONTACT INFORMATION			
Name	Phone Number(s)	Relationship	
RESIDENTIAL HISTORY (List all previous residential addresses for the past 10 years. Attach additional sheets if needed)			
Current Address		Own Rent	Dates Resided From To
Previous Address		Own Rent	Dates Resided From To
Previous Address		Own Rent	Dates Resided From To
Previous Address		Own Rent	Dates Resided From To
EMPLOYMENT HISTORY (List employment going back 10 years. Attach additional sheets if needed.)			
Current Employer	Address	Phone #	Supervisor Name
Job Title	Responsibilities	Dates employed	
		From To	
Normal work days/hours			
Previous Employer	Address	Phone #	Supervisor Name
Job Title	Responsibilities	Dates employed	
		From To	
Normal work days/hours			

Previous Employer	Address	Phone #	Supervisor Name
Job Title	Responsibilities	Dates employed	Normal work days/hours
		From To	

MILITARY HISTORY - Are you now serving, or have you ever served in the military? Yes No (If yes, please complete the following section.)

Branch of Service	Active	If presently active/reserve: Date of Entry	If discharged:
	Reserve		Date of discharge
	Discharged		Type of discharge

EDUCATIONAL HISTORY (Attach a photocopy of any proof of your educational attainment.)

Have you graduated from High School or completed a GED?	School Name, City, State	
Yes No		
Business / Technical / Trade School	School Name, City, State	Date Last Attended
Years		
College Level Completed:	School Name, City, State	Degree Type
Years		BA MA MBA PhD
		BS MS JD MD
Degree Received? Yes No		Major / Minor

CRIMINAL HISTORY

Have you ever been convicted of a felony?	If yes, please explain and provide details:
Yes No	

MOTOR VEHICLE HISTORY

Attach the following to your application upon submission: . Copy of your current MVR (Motor Vehicle Report)

Photocopy of your current, unexpired Colorado driver's license

Photocopy of your current Proof of Insurance

PREVIOUS FIRE DEPARTMENT EXPERIENCE

Do you have firefighter experience:	Yes No	Are you currently receiving a pension from any paid or volunteer department?	Current Certifications (attach photocopies of certifications)
(If yes, provide name, location, and phone # of agency)		Yes No	Firefighter I Firefighter II
Dates of active membership:			Fire Officer First Responder
From To			EMT – Basic EMT - Intermediate
			Paramedic
Paid Employee	Volunteer Member		

REFERENCES			
Name	Relation	Phone Number	Time Known
Name	Relation	Phone Number	Time Known
Name	Relation	Phone Number	Time Known
Additional Qualifications or Experiences – Please provide any additional information regarding any special skills you may have that would be helpful to us in considering your application.			
AUTHORIZATION AND CERTIFICATION			
<p>I certify to the best of my knowledge and belief, that the answers given by me to all questions on this application and attachments are true, correct, complete and without any significant omissions, and I recognize that this information is subject to verification. I understand any omission or misrepresentation of fact in the application may result in refusal of acceptance of my application for membership and in termination of membership with the Hartsel Fire Protection District.</p> <p>I also understand that I will be asked to submit to a physical exam as part of my application process for membership. I understand that the physical examination and testing for drugs will be done by an independent laboratory selected by Hartsel Fire Protection District and that the results of the physical exam will be given to representatives of Hartsel Fire Protection District for the purpose of evaluating my eligibility for membership.</p> <p>As an applicant for membership, I hereby authorize Hartsel Fire Protection District and its agents to contact any third parties (including current and previous employers, schools, credit bureaus, licensing authorities, motor vehicle departments, governmental agencies, and individuals familiar with my background to obtain information which is deemed necessary or appropriate in connection with my application and qualifications for membership. This information may include, but is not limited to, references, academic background, performance, disciplinary, attendance, personal history, consumer credit, motor vehicle and criminal conviction records.</p> <p>I hereby release Hartsel Fire Protection District, its employees and agents and any individual, entity or agency they may contact from any claims arising from making or responding to such requests for information.</p>			
Signature:	Printed Name:	Date:	
Date of Birth:	SSN: - -	Phone: () -	
Address:			
City:	State:	Zip:	

HARTSEL FIRE PROTECTION DISTRICT IS AN EQUAL OPPORTUNITY ORGANIATION AND COMPLIES WITH APPLICABLE FEDERAL, STATE AND LOCAL LAWS PROHIBITING DISCRIMINATION



Hartsel Fire Protection District

AUTHORIZATION TO RELEASE INFORMATION

Please be advised that I have applied for a volunteer position with the Hartsel Fire Protection District. I have been requested to provide information for their use in reviewing my background and qualifications. Therefore, authorize the investigation of my past and present health, character, education, military, criminal and financial history and qualifications, The release in any manner of all information by you is hereby authorized whether such information is of record or not, and I do hereby release all persons, agencies or firms from any liabilities resulting from providing such information. This authorization is valid for 1 year from the date of my signature below, or for the duration of my volunteer membership with Hartsel Fire Protection District, whichever is longer.

Please keep this photocopy of my release request for your files. Thanks for your cooperation.

Signature: _____

Social Security Number: _____ - _____ - _____

Address: _____

State: _____ Zip Code: _____

Telephone Number: _____ Cell Phone: _____



Hartsel Fire Protection District

APPLICATION REVIEW

DEPARTMENT ADMINISTRATOR'S REVIEW		
Date of Review	Approved	Comments
	Denied	
Printed Name:		Signature:
Medical Exam: Scheduled Results Received	Background: Initiated Results Received	