



Dear Applicant:

We are very pleased that you are applying to the WVFD/WVEMS for membership. By filling out this application you are applying to become a **Member of Weston Volunteer EMS**.

Your application will be considered complete when all of the following are received:

1. Membership application completed, signed and notarized.
2. Fingerprinting by the Weston Police Department. (Forms at the police station.)
3. Three reference forms from friends, neighbors, associates, clergy, or fire or EMS department members, etc. sent directly to:

Tami Campos, WVFD/WVEMS
52 Norfield Road, Box 1163
Weston, CT 06883

Please mail your complete application to Tami Campos also.

Once all of the above requirements have been met, and reviewed by the Membership Committee, the Membership Chairman will contact you. If your application is accepted, you will be required to pass a physical exam and get a hepatitis B immunization or sign the appropriate waiver. If you have any questions, contact Martina Kaeslin or Karyl McGill at westonemsinfo@gmail.com

Thank you for your interest.



Release Form

I hereby give permission for The Weston Volunteer Fire Department to gather information, and criminal and driving records pertaining to me. This information is only to be used by the Weston Volunteer Fire Department regarding my application to this organization and will be held in the strictest confidence by this organization and will not to be shared with any other parties.

_____ (signature) _____ (date)

Name _____ (last) _____ (first) _____ (maiden)

Date of birth _____ Social Security # _____

Email address: _____

Current address _____

Previous addresses you lived at over the last 10 years:

Weston Volunteer Fire Department - EMS Division
52 Norfield Road, PO Box 1163
Weston, CT 06883
(203) 222-2647

Name _____

Address _____

Phone _____ Social Security No. _____

Email address _____

Birthplace _____

Date of Birth _____ Height _____ Weight _____

Employer (Start with present and go back 5 years)

Name and Address _____

Supervisor _____ Phone _____

Reason for Leaving _____

Name and Address _____

Supervisor _____ Phone _____

Reason for Leaving _____

Education:

Schools/Colleges	Address	Grade(s) Completed
------------------	---------	--------------------

_____	_____	_____
_____	_____	_____

References: List three persons you will give the reference forms to:

Name

Address

Phone

Have you ever been a member of a Fire Dept. or EMS? _____

Name and address, dates of membership and supervisor

List any firefighting/rescue/medical training you have received. Attach copies of certifications to this application

Marital Status: (circle) Single Married Widowed

Spouse name, if married: _____

CT Drivers License # and Class _____

HAVE YOU EVER BEEN ARRESTED? CHARGES OR HELD FOR ANY VIOLATION OF ANY FEDERAL, STATE OR LOCAL LAW, REGULATION OR ORDINANCE? _____

IF SO PROVIDE THE FOLLOWING:

DATE	PLACE	CHARGE(S)	ACTION TAKEN
_____	_____	_____	_____
_____	_____	_____	_____

Person to be notified in the event of an emergency:

1. Name _____ Relationship _____
Address _____ Home _____
Phone _____ Cell Phone _____

2. Name _____ Relationship _____
Address _____ Home _____
Phone _____ Cell Phone _____

I am applying for: **Membership – WVEMS**

I certify that all the above answers are true to the best of my knowledge. I further understand that any misrepresentation or omission will be grounds for immediate discharge.

SIGNATURE: _____ DATE: _____

Subscribed & sworn to before me

This _____ Day of _____ 20_____.

Notary Public

Weston Volunteer Fire Department - EMS Division
52 Norfield Road, PO Box 1163
Weston, CT 06883
(203) 222-2647

APPLICANT, PLEASE GIVE THIS PAGE AND THE NEXT TO EACH OF THE PEOPLE WHO WILL BE PROVIDING A REFERENCE FOR YOU

The person named on the next page has applied for WVFD membership as a Volunteer EMT (Emergency Medical Technician) and named you as a personal or professional reference. Please take time to answer a few questions about the applicant.

Return the completed form in a sealed envelope to:

Tami Campos, WVFD/WVEMS
52 Norfield Road, PO Box 1163
Weston, CT 06883

All responses remain completely confidential—the applicant will never see this form.

We cannot complete an application until we receive your reference. If you have any questions, email westonemsinfo@gmail.com, or

Tami Campos officemgr@westonfirerescue.com 203-222-2647

Thank you,
Weston EMS Membership
Weston Volunteer Fire Department, Inc. - EMS Division

Applicant Name _____

Reference Name _____

How long have you known the applicant?

Why do you think the applicant would make a good emergency services responder?

Describe the applicant's personality:

What special skills do you know the applicant to have?

Everyone has pluses and minuses, what are the applicant's pluses?

How about minuses?

Please use the space on the back of this page to give any details about your knowledge of the applicant that would be helpful to us in evaluating their membership application.

Weston Volunteer Fire Department - EMS Division
52 Norfield Road, PO Box 1163
Weston, CT 06883
(203) 222-2647

APPLICANT, PLEASE GIVE THIS PAGE AND THE NEXT TO EACH OF THE PEOPLE WHO WILL BE PROVIDING A REFERENCE FOR YOU

The person named on the next page has applied for WVFD membership as a Volunteer EMT (Emergency Medical Technician) and named you as a personal or professional reference. Please take time to answer a few questions about the applicant.

Return the completed form in a sealed envelope to:

Tami Campos, WVFD/WVEMS
52 Norfield Road, PO Box 1163
Weston, CT 06883

All responses remain completely confidential—the applicant will never see this form.

We cannot complete an application until we receive your reference. If you have any questions, email westonemsinfo@gmail.com, or

Tami Campos officemgr@westonfirerescue.com 203-222-2647

Thank you,
Weston EMS Membership
Weston Volunteer Fire Department, Inc. - EMS Division

Applicant Name _____

Reference Name _____

How long have you known the applicant?

Why do you think the applicant would make a good emergency services responder?

Describe the applicant's personality:

What special skills do you know the applicant to have?

Everyone has pluses and minuses, what are the applicant's pluses?

How about minuses?

Please use the space on the back of this page to give any details about your knowledge of the applicant that would be helpful to us in evaluating their membership application.

Weston Volunteer Fire Department - EMS Division
52 Norfield Road, PO Box 1163
Weston, CT 06883
(203) 222-2647

APPLICANT, PLEASE GIVE THIS PAGE AND THE NEXT TO EACH OF THE PEOPLE WHO WILL BE PROVIDING A REFERENCE FOR YOU

The person named on the next page has applied for WVFD membership as a Volunteer EMT (Emergency Medical Technician) and named you as a personal or professional reference. Please take time to answer a few questions about the applicant.

Return the completed form in a sealed envelope to:

Tami Campos, WVFD/WVEMS
52 Norfield Road, PO Box 1163
Weston, CT 06883

All responses remain completely confidential—the applicant will never see this form.

We cannot complete an application until we receive your reference. If you have any questions, email westonemsinfo@gmail.com, or

Tami Campos officemgr@westonfirerescue.com 203-222-2647

Thank you,
Weston EMS Membership
Weston Volunteer Fire Department, Inc. - EMS Division

Applicant Name _____

Reference Name _____

How long have you known the applicant?

Why do you think the applicant would make a good emergency services responder?

Describe the applicant's personality:

What special skills do you know the applicant to have?

Everyone has pluses and minuses, what are the applicant's pluses?

How about minuses?

Please use the space on the back of this page to give any details about your knowledge of the applicant that would be helpful to us in evaluating their membership application.