

Williamson County **Emergency Services District 6**

Membership Application 450 FM 1105 Georgetown, TX 78626



Dear Applicant,

Thank you for considering Williamson County Emergency Services 6 as a place to serve your community. By filling out this application, you have an interest in protecting and saving the lives and property of the people in this community and surrounding areas. We are all held to the same excellent standards. This application applies to all applicants seeking volunteer member status.

Volunteers at this department are expected to attend training events, drills, and business meetings. This is to familiarize yourself with what we do, our apparatus, equipment, policies and to get to know those you will be working with. During the application process you will be expected to submit to a pre-service background check, driving record review, and panel interview to be a member of the WCESD 6. After successful completion you will have an interview with the Chief who will make the final determination on membership approval after reviewing recommendations from the panel interview and reviewing all submitted documentation. Once a member you will be placed into a probationary status and will be assigned depending on your level of certification. The status of a probationary can be revoked at any time if your progress and commitments are not deemed acceptable by the Fire Chief, Assistant Fire Chief, or the Training Officer. During the time in probationary, you will complete introductory training, Williamson County Scope of Care Test. You will also be assigned a department mentor that will assist you with the beginning or continuation of your service as a member.

Volunteers may be called upon at any time to assist with grass fires, station standbys, medical calls, vehicle collisions, natural disasters, structure fires, and other types of emergencies.

Once your probationary status has ended and you have been cleared by the Training Officer with concurrence from the Fire Chief, you can then be moved off probationary status provided all appropriate levels of training and certification/licensure are completed as outlined in your designated training plan as provided by the Training Officer.

Please complete this application and bring it with you as well as other required documentation as part of panel interview.

WCESD6

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1. APPLICANT I You must comple should not be con cause. WCESD 6 religion, age or d	ete all sections nstrued as a c is an Equal O	of this ap contract. M pportunity	embershi Employer	p WCESD and does	6 is at- not di	-will scrir	and r	may be e on th	term e bas	ninated at a sis of race,	any ti	me with o	r without
Last Name				First						M.I.	DO	В	
Street Address				<u>'</u>						Apartment,	/Unit	#	
City				State						ZIP			
Phone				E-mail A	Address								
Date Available			Social Sec	curity No.		-	-		Sex	М		F 🗌	
Are you a citizen of	the United Stat	es?	YES 🗌	NO 🗆	If no,	are y	you au	thorized	to w	ork in the U.	.S.?	YES	NO 🗆
Have you ever work	ked for this com	ipany?	YES 🗌	NO 🗆	If so, \	wher	า?						
Have you ever beer	n convicted of a	felony?	YES 🗌	NO 🗆	If yes,	exp	lain						
2. EMERGENCY	CONTACT I	NFORMA	TION										
Full Name						Rela	ationsl	nip					
Company						Pho	one	()				
Address													
3. DRIVERS LIC	CENSE INFO	RMATION	1										
State of License							ense mber						
Expiration						Clas							
Date						Clas	33						
4. EDUCATION													
High School				Address									
From	То	Did you gr	aduate?	YES	NO []	Degre	ee					
College				Address									
From	То	Did you gr	aduate?	YES	NO		Degre	ee					
Fire Ac.				Address									
From	То	Did you gr	aduate?	YES	NO []	Degre	ee					
EMT School				Address									
From	То	Did you gr	aduate?	YES	NO		Degre	ee					
Other				Address									
From	То	Did you gr	aduate?	YES	NO []	Degre	ee					

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5. REFERENCES	S								
Please list three pr	rofessional referenc	ces.							
Full Name				Relationship					
Company				Phone	()			
Address									
Full Name				Relations	ship				
Company				Phone	()			
Address									
Full Name				Relations	ship				
Company				Phone	()			
Address									
6. PREVIOUS E	MPLOYMENT								
Company	-			Phone	()		
Address				Supervis	or				
Job Title			Starting Salary	\$			Ending Salary \$		
Responsibilities									
From	То	Reason for Leaving							
May we contact yo	ur previous superv	visor for a reference?	YES 🗌	NO 🗌					
Company				Phone	()			
Address				Supervis	sor				
Job Title			Starting Salary	\$			Ending Salary \$		
Responsibilities									
From	То	Reason for Leaving							
May we contact yo	ur previous superv	visor for a reference?	YES 🗌	NO 🗌					
Company				Phone	()			
Address				Supervis	or .				
Job Title			Starting Salary	\$			Ending Salary \$		
Responsibilities									
From	То	Reason for Leaving							
May we contact yo	ur previous superv	visor for a reference?	YES 🗌	NO 🗌					

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7. SERVICE OF	RGANIZATIONS	5 – FIRE, EMS OR EMERGENCY	SERVICES	(PAID OR VOL	UNTEER)					
Agency				Phone ()						
Address				Supervisor						
Responsibilities										
From	То	Reason for Leaving								
May we contact yo	our previous superv	visor for a reference? YES	NO 🗆							
Agency			Phone ()						
Address			Supervisor							
Responsibilities										
From	То	Reason for Leaving								
May we contact yo	our previous superv	visor for a reference? YES	NO 🗆							
Agency			Phone ()						
Address			Supervisor							
Responsibilities										
From	То	Reason for Leaving								
May we contact yo	our previous superv	visor for a reference? YES	NO 🗆							
8. MILITARY S	SERVICE									
Branch	21111-101			From	То					
Rank at Discharge		Type of Discharge								
If other than hono	rable, explain									
List any fire, res Include expiration	cue, EMS and/or on dates and cert	AND TRAINING emergency management, training ifying state, department, or agence record. (Examples include SFFM	y. Please p	rovide copies o	of your certifications to					
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										

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9.	
10.	
Pleas	PERSONAL HISTORY se take a few moments and tell us about yourself. Include information about why you want to be a member of this rtment and where you see yourself in the next 5 years.
BY S	D THE FOLLOWING STATEMENT CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE GIGNING AND DATING IN THE SPACE PROVIDED BELOW
certify	ify that my answers are true and complete to the best of my knowledge and I have not intentionally omitted any information. I furt y that there are no willful misrepresentations or falsifications of the above statements and answers to questions. If an investigation ses such misrepresentations, omissions and/or falsifications, my application could be rejected.
crimir	mson County ESD 6 and/or any Department representative thereof is hereby authorized to make investigation of my personal histonal history, driving record, and/or employers, educational institutions, law enforcement agencies, and other individuals and agencies accredited.
	erstand that acceptance may be conditioned on my passing a drug screening.
I und	erstand that nothing said or implied during the application process should be deemed to constitute the terms of a contract.
	s application leads to membership with the Weir Volunteer Fire department, I understand that false or misleading information in my ration or interview may result in my release.

Signature

Date