## **Bashaw Fire Department**

## **Application Form**

All information received will be held in strict confidence in accordance with Federal and Provincial privacy laws. In order for the application to be considered, all sections must be fully completed.

Address

First Name

Surname

Home Phone	Work Phone	Occupation
Over 18 years of age Yes/ No	Drivers licence number	Email
Back Ground Information		
Do you have any previous experience or related training that would be considered an asset to the Bashaw Fire Department (attach relevant documentation).		
<ul> <li>➢ Are you willing to attend weekly practice sessions?</li> <li>➢ Will you participate in required training courses?</li> <li>➢ Are you willing to undergo an RCMP criminal records check?</li> </ul> References List (3) personal references (excluding relatives)		Yes No Yes No Yes No
Name	Phone Number	How you know reference
All Information provided is correct and accurate to the best of my knowledge		
Signature: Date:		