

Have you ever used illegal narcotics or other drugs?  Yes  No

Have you ever been arrested?  Yes  No

Have you ever been convicted of a crime or indictable offense?  Yes  No

If yes, provide details including pertinent dates, charges, and current status.

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Are you subject to any (temporary or permanent) restraining order?  Yes  No

If yes, provide details. \_\_\_\_\_

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Do you have a high school diploma or GED?  Yes  No

In your own words, please indicate the reason you wish to become a member of this fire company:

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List at least two references, not related to you, that can attest to your fitness for participation in an emergency service agency.

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ zip \_\_\_\_\_

Years known \_\_\_\_\_

Phone number \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ zip \_\_\_\_\_

Years known \_\_\_\_\_

Phone number \_\_\_\_\_

If accepted by this volunteer fire company, I agree to comply with all lawful orders, rules, and regulations of the fire company and the Ocean Grove Fire Department. I further agree to submit to physical examination, including toxin screening, and to background check at the time of application and to further and continuing toxin screening and background checks as may be required by the fire company and the Ocean Grove Fire Department from time to time during my tenure. I hereby certify that I completed this application and all statements contained herein are true and complete to the best of my knowledge. I understand that the fire company is not required to accept my application, is not required to offer membership to me, and that any false statement on this application is sufficient cause for rejection or dismissal. The fire company or a representative of Neptune Fire District No. 2 (Ocean Grove Fire District) may contact my references, other emergency service agencies that I have applied to or that may be aware of my fitness for service or past service, current or past employers, or personnel involved in my education or training. I understand that I have a continuing obligation to report any activity which may be of concern regarding my fitness for public service, and specifically arrests, traffic offenses, substance abuse, or legal restraints.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_