



WEST TRENTON VOLUNTEER FIRE COMPANY NO. 1, INC.
40 WEST UPPER FERRY ROAD
EWING, N.J. 08628
(609) 883-0325
www.wtvfc.org

Thank you for your interest in becoming a volunteer member of the West Trenton Volunteer Fire Company. Our mission is to provide excellent service to the residents and visitors of Ewing Township. We are looking for individuals with a passion for helping others through selfless service. If this sounds like you, we hope the information below will help you make an informed decision about joining us.

Application Process

Applying for membership involves a two-part process, which includes submitting both the attached WTVFC application and the Ewing Township employment application. After review, the applicant will be contacted to schedule an in-person recruitment interview.

We will be happy to guide you through this process. If you have any questions, please feel free to contact our Recruitment Committee or the Company President.

Completed applications can be submitted in person at the firehouse or emailed to recruitment@wtvfc.org

Junior Membership Applications

Applicants aged 15-18 must include a signed letter from a parent or guardian granting permission to complete the membership application process. Additionally:

- At least one parent or guardian **must** attend the candidate's recruitment interview.
- If accepted as a junior member, you will need to provide a copy of your current working papers from the N.J. Department of Labor Workforce Development Agency.

Equal Opportunity Membership

West Trenton Volunteer Fire Company is an equal opportunity organization. Membership is open to all eligible applicants regardless of race, creed, religion, gender, age, or national origin. We also welcome individuals with physical or mental disabilities who are capable of performing the duties required of emergency services personnel.

Thank you again for considering membership with the West Trenton Volunteer Fire Company. We appreciate your interest and look forward to the possibility of welcoming you to our team.

Respectfully,
WTVFC Recruitment Committee



West Trenton Volunteer Fire Company No.1 Inc.

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Membership Application

Section I: Personal Information

Name: _____
 Last First Middle

Address: _____
 Street City State Zip

Telephone: _____
 Home Cell Social Security Number

_____ Driver's License Number State Expiration Date

_____ Date of Birth Are you a citizen of the United States or do you have an Employment Authorization Document (EAD)? YES NO

How long have you lived in Ewing Township? _____

Have you even been indicated or convicted of a criminal offense? If yes, explain: _____

YES NO _____

Previous Fire and Emergency Services Experience (Please attach any training certificates that may apply):

Name of Organization	Position(s) Held	Dates of Service	Reason for Leaving	Name & phone # of Contact Person

Employment History (if at current job less than 1 year, please list job prior):

Name of Company	Position(s) Held	Dates of Employment	Reason for Leaving	Name & phone # of Contact Person

Section II: Education

Type of School	Name and Location	Course of Study	# of Years	Grade Average	Degree, Diploma, Certificate, and Honors Received
High School					
College or University					
Other Education					
Other Education					

Section III: Membership

Have you applied for membership here before? YES NO If Yes When: _____

Type of membership applying for: Firefighter Business Member Junior Member Other

Are you affiliated with any other Emergency Service Organizations? YES NO If yes, which one? _____

Are you currently on any firefighter hiring list? YES NO If yes, which one? _____

Would you be willing to work fire company fundraisers? YES NO

Section IV: Personal References

Name	Address	Phone Number	Relationship

Section V: General Information and Next Step

After you turn your application into the Fire Company, your name will be read to the general membership at the next regularly scheduled business meeting, which occurs on the first and third Mondays of every month at 8 PM. This is known as the "first reading". After your first reading, you name will again be read at the next regularly scheduled fire company meeting. After this second reading, you need to meet with the Membership Committee. The Membership Committee meets before the regularly scheduled company meetings at 7:30 PM at the firehouse. You will be required to be at the Membership Committee meeting and the regularly scheduled fire company meeting that follows. Once you have been accepted for membership, more information will be given to you at that will cover all aspects of the Fire Company. Thank you for your interest in the Fire Company and we look forward to meeting you!

Section VI: Acknowledgment

I certify that the answers given by me in this application are correct to the best of my knowledge. I understand that any falsifications of this application, whether willingly or accidental, is grounds for disqualification of membership consideration, or dismissal from membership if I am accepted. I hereby authorize the Veterans Administration, United States Army, Navy, Air Force, Marines, Coast Guard, Military Reserve, all Law Enforcement Agencies, City, State, and Federal Tax Bureaus, Schools, Universities, Physicians, Hospitals and Institutions, to furnish the West Trenton Volunteer Fire Company with any and all available information and copies of records regarding me in order that they may determine my suitability for. Further, I release the above mentioned references from any and all liability for any damages that may result from information collected by this company.

Applicant's Signature: _____ Date: _____

The Township of Ewing

2 Jake Garzio Drive, Ewing, NJ 08628

Application For Employment

Prospective employees will receive consideration without discrimination toward race, creed, color, gender, age, national origin, handicap or veteran status.

Personal	Last		First		Middle		Date		
	Street Address						Home Phone		
	City, State, Zip						Date of Birth		
	Have you applied with us previously?		No	Yes	Month, Year, Location		SSN		
	Position Desired						Gender	Female	Male
	Do you have any physical conditions which may require ADA Assistance? If so, please describe.						Are you a U.S. Citizen?	Yes	No
	Have you ever been convicted of a crime other than minor traffic violations? If so, please explain.						Do you have any relatives employed by Ewing Township? If so, please list.		
	Ethnicity (optional)	Black	White (non-Hispanic)	Hispanic	Asian	American Indian	Alaskan Native	Pacific Islander	

Employment History

Please give an accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

1	Company			Employed from		to	
	Street Address, City, State, Zip				Name of Supervisor		
	Job Title and Nature of Work				Supervisor's Phone		
	Reason for Leaving				May we contact this employer?		

2	Company			Employed from		to	
	Street Address, City, State, Zip				Name of Supervisor		
	Job Title and Nature of Work				Supervisor's Phone		
	Reason for Leaving				May we contact this employer?		

3	Company			Employed from		to	
	Street Address, City, State, Zip				Name of Supervisor		
	Job Title and Nature of Work				Supervisor's Phone		
	Reason for Leaving				May we contact this employer?		

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Education

Please indicate the highest level of schooling you have completed.

Grammar School

Associate's
DegreeHigh School
(circle last year completed) 9 10 11 12

Bachelor's Degree

Some College

Master's Degree

Please describe any other pertinent training or skills you possess, or to list any licenses, certificates or registrations you feel are applicable.

Military Service

Have you served in the U.S. Armed Forces? If so, which Branch?

Do you have Veteran Status?

Please list any training you received you feel is relevant to the position for which you are applying.

References

1	Name	Home Phone
	Street Address	Work Phone
	City, State, Zip	Email

2	Name	Home Phone
	Street Address	Work Phone
	City, State, Zip	Email

3	Name	Home Phone
	Street Address	Work Phone
	City, State, Zip	Email

Further Questions

Have you ever been convicted of a disorderly person's offense that has not been expunged or sealed?

Have you ever been convicted of a criminal offense that has not been expunged or sealed?

Are you an alcoholic?

Are you dependent upon the use of any narcotic or other dangerous controlled substance?

Signature

I hereby represent that each answer to a question herein and all other information otherwise furnished is true and correct. I further represent that such answers and information constitute a full and complete disclosure of my knowledge with respect to the question or subject to which the answer or information relates. I understand that any incorrect, incomplete or false statements or information furnished by me will subject me to discharge at any time. In the event that I am employed by Ewing Township, I agree to comply with all of its rules, regulations and orders. I hereby authorize my former employers to give any information regarding my employment with them, and in addition, to furnish any other information they may have concerning me.

Signed

Date