Moonachie First Aid and Rescue Squad Application

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_

Street Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code:\_\_\_\_\_\_\_\_\_\_

Cell Phone:\_\_\_\_\_\_\_\_\_\_\_ Home Phone:\_\_\_\_\_\_\_\_\_

E-Mail Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

D.O.B.\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver’s License#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you currently an Emergency Medical Technician?\_\_\_\_\_\_\_\_\_\_

If Yes, When did you earn your Certification?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When does your Certification Expire?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If No, Have you ever been an Emergency Medical Technician\_\_\_\_

Are you First Responder Certified?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If Yes, When does your Certification expire?\_\_\_\_\_\_\_\_\_\_\_\_

Are you Heavy Rescue Certified?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If Yes, When does your Certification expire?\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you Fire Vehicle Extrication certified?\_\_\_\_\_\_\_\_\_\_\_\_\_

If Yes, When does your Certification expire?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you C.P.R. Certified?\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If Yes, When does your Certification expire?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What Days and Times are You Available to Ride?

(( Please fill in Times in Available Slots ))

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|  |  |  |  |  |  |  |

Have you ever been convicted of a Felony?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If Yes, Please Explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are You Bilingual?\_\_\_\_\_\_ If Yes, Which Language?\_\_\_\_\_\_\_\_\_\_\_

Are You a U.S. Citizen?\_\_\_\_\_\_\_\_\_\_\_\_

What is the reason you wish to join The Moonachie First Aid and Rescue Squad?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **DO NOT WRITE BELOW. SQUAD OFFICERS ONLY** |

Date Joined:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reviewed By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Approved:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_