

KUTZTOWN FIRE & RESCUE



APPLICATION FOR VOLUNTEER MEMBERSHIP

Application for Volunteer Membership

Name: _____

Local Address: _____ Bldg/Apt: _____

City: _____ State: _____ Zip Code: _____

Home Address: _____ Bldg/Apt: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email: _____ DOB: _____ Social Security Number: _____

Emergency Contact Information

Name: _____ Relationship: _____

Address: _____ Bldg/Apt: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Dept. Use Only

Date Submitted: _____ Received By: _____ Date: _____

Approved?: Yes No Date: _____ Firefighter Auxiliary Member ID#: _____

MEDICAL INFORMATION (Provide as much of the following as possible)

Blood Type: _____

Medications: _____

Allergies (medical and/or environmental requiring intervention): _____

Other Medical Condition(s): _____

Family Doctor: _____ Phone Number: _____

CRIMINAL HISTORY

Have you ever been convicted of any summary offense, misdemeanor, or felony? Yes No

If yes, explain in as much detail as possible, including actual charges, dates, and disposition(s):

EMPLOYMENT

Current Employer: _____ Position: _____

Employer Address: _____ City/State/Zip: _____

Supervisor Name: _____ Phone Number: _____

REFERENCES

Please list three (3) references that you have known for more than one year and can attest to your character, judgment, and reliability. One (1) reference may be a relative.

NAME	PHONE	RELATIONSHIP	YEARS KNOWN

By signing below, I affirm that I have never been convicted of an offense that constitutes the crime of "Arson and Related Offenses" under 18 Pa. C.S. §3301 or any similar offense under any Federal or State law. I hereby affirm and certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly and/or intentionally omit, forge, or purposefully mislead or make any false statement herein, I am subject to penalties prescribed by law, including, but not limited to, a fine of at least \$1,000 and may result in my dismissal from Kutztown Fire & Rescue, Inc.

Signature of Applicant: _____

Name: _____ Date: _____

The following items must be returned with this application:

- 1- Copy of Driver's License or State ID Card
- 2- Copy of Criminal Record Check (PATCH)
- 3- Copy of Child Abuse History Check
- 4- Applicable Training Certificates

If Applicant is between the ages of 16 and 18, parent or guardian must read and sign below:

I, _____ have reviewed this letter and discussed its contents with my child about the activities associated with being a Junior Member of Kutztown Fire & Rescue, Inc.

Having no further questions, I consider my child _____ to possess the necessary maturity to perform the duties of a Junior Member of the Kutztown Fire Company and authorize their enrollment in the Kutztown Fire & Rescue Junior Firefighter Program.

Signature of parent or legal guardian: _____

Print: _____ Date: _____

Relationship: _____

Signature of Applicant: _____

Print: _____ Date: _____

Pennsylvania Access To Criminal History

- 1) Go to: <https://epatch.state.pa.us>
- 2) Click on "New Record Check (Volunteers only)"
- 3) Check the "Volunteer Acknowledgement Section" box and click the "Accept" button
- 4) Fill out all required information with a red asterisk (*) and submit the request
- 5) Print out the page(s) with the results and return to a Chief Officer

Pennsylvania Child Abuse History Clearance

- 1) Go to: <https://www.compass.state.pa.us/cwis/public/home>
- 2) Click on "Create Individual Account"
- 3) Create an ID and enter your legal first and last names as they appear on your driver's license or birth certificate
- 4) Enter all of the required information and click "Finish" when done
- 5) Retrieve password from the email address you used to create your account
- 6) Go to: <https://www.compass.state.pa.us/CWIS/Public/AccountType> to login
- 7) Click on "Access My Clearances"
- 8) Scroll to the bottom and click "Continue"
- 9) Enter your username and provided password
- 10) Set a permanent password and click "Submit"
- 11) If needed, go back to the web address in step 6
- 12) Click on "Create Clearance Application"
- 13) Click "Begin" at the bottom right of the screen
- 14) Under Application Purpose, select "Volunteer Having Contact with Children..."
- 15) Locate Kutztown Fire Company in the drop down boxes
- 16) Complete the questions that follow and click "Next"
- 17) Complete the form for your current address and click "Next"
- 18) Enter all of your previous addresses since 1975 where you lived for longer than 3 months and click "Next"
- 19) Add all people that currently live with you and have lived with you in the past (including parents, siblings, spouse, child(ren), etc.)
- 20) Review the application and click "Next"
- 21) Add your eSignature and certify the information is correct and click "Next"
- 22) There is no code for your application. Select "No" and "Submit Application"

You will receive an email update when your clearance is available

- 1) Log back in to your account and download your clearance
- 2) Bring a hard copy printout of your clearance to a Chief Officer