Serving the Borough of Kane and Wetmore Township

Kane Volunteer Fire Department Inc.

POPLAR STREET, KANE, PA 16735 P.O. BOX 66



Member Tri-County Association Member Central District Association Member State Fireman's Association

Membership Application

Date of Application: _____ / _____

Positi	on(s) Applied For: Firefighte	er Fire Pol	ice	Auxilary	
Last Name:		First Name:			MI:
Street Address:			City: Kane	State: PA	Zip: 16735
Drivers License #	::	State: PA	SS#:		
DOB:	// F	Place of Birth:			
Home Phone:	Work Phon	e:	Mobil	e Phone:	

You will be required to pass a PSP Criminal Background Clearance (Criminal History), Child Abuse History Clearance from the Dept. of Human Services, and an FBI Criminal Background Clearance to become a member of the Kane Volunteer Fire Department. If accepted, the department will help you complete this process. You will not be able to attend any fire department functions as a member or answer emergency calls until this is complete.

	Will you pass the background checks: Yes	Unknown:
If unknown, please exp	plain:	

Please read carefully and complete by printing in ink only

The Kane Volunteer Fire Department does not and shall not discriminate based on race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. These activities include, but are not limited to, selection of volunteers and vendors, and provision of services. We are committed to providing an inclusive and welcoming environment for all members of our organization and those requiring or requesting our services.

<u>Please provide all information requested</u>. Your completed application form will be processed according to the Kane Volunteer Fire Department By-Laws. You will be asked to attend an in-person interview with the Board of Directors and Fire Chiefs. Your application will not be processed until your in-person interview is complete.

Employment History

Current Employer:		Job Title:			
Street Address:	City:	State: Zip:			
Brief description of job:					
Supervisor:	Phone	Number:			
Dates Worked From: / / To:	//	Still Employed:			
What shift or hours do you work:					
Education History					
Highschool Name:	City / State:				
Dates Attended From: / / To:	//	_ Graduated: Y / N			
Technical / Trade School (post highschool):					
College (list all attended and any degrees):					

Fire Department History

Have you ever belonged to any other fire departm	Please list the most recent below			
FD Name:		Title / Office Held:		
Street Address:	City:	State:	_ Zip:	
Please list any certifications:				
Chief:		one Number:		
Military History:				
Have you been in the military: Y / N Branc	h of Service:			
Dates From: / / To: /	/	Honorable Discharge: Y / N		
Professional / Work References				
Name:	·	Title / Relationship:		
Street Address:	_ City:	State:	_ Zip:	
Phone Number:	_ Occupation: _			
Name:		Title / Relationship:		
Street Address:	_ City:	State:	_ Zip:	
Phone Number:	_ Occupation: _			
Name:		Title / Relationship:		
Street Address:	_ City:	State:	_ Zip:	
Phone Number:	_ Occupation: _			
Signature:		Date: / /		