

# Cherokee Volunteer Fire Fighters, Incorporated

P.O. Box 181  
Cherokee, Alabama 35616

## Application for Membership:

This application is designed to allow the Cherokee Volunteer Fire Fighters to evaluate potential members and to make decisions concerning future fire fighters.

In applying for membership to the Cherokee Volunteer Fire Fighters, Inc. there are certain things that the potential member must subscribe to:

1. A 100% acceptance vote of the membership is required to enter the Rookie Fire Fighter Program. If rejected the applicant may reapply again in 6 months. The Cherokee Volunteer Fire Fighters, Inc. reserves the right to make known or to keep confidential the reasons for rejection of the applicant.
2. If accepted into the rookie program you will not have a key to the building, you will not drive the fire apparatus, and you will not do any thing on the fire ground unless directed to do so by an Officer or fire fighter on the scene. You will be in rookie status for one (1) year. At the end of that year you will be evaluated as to performance and either retained for further training, advanced to Fireman First Class, or asked to end your training and turn in all equipment issued to you.
3. The fire department is run on a para military basis, with rank and observance of that rank. Respect for rank and seniority is expected. After one becomes a fire fighter he/she is expected to continue training during drills held on Thursday night and to attend all fires when possible. We realize your work schedule may at times hinder this; but one must train and attend fires to remain a part of the Cherokee Volunteer Fire Fighters, Inc.

## PLEASE PRINT

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone: (     )                      SSN:                      ALDL.#: \_\_\_\_\_

Sex:              Age:              D.O.B.:              Height:              Weight:              Race: \_\_\_\_\_

Are you a citizen of the U.S.:              If no explain: \_\_\_\_\_

Employer: \_\_\_\_\_ Address \_\_\_\_\_ Phone: \_\_\_\_\_

If not presently employed please give reason for leaving: \_\_\_\_\_

If employed above less than 5 years please list previous employer, address, phone number, and reason for leaving:

Employer: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Have you ever been convicted of a felony, or do you have a felony case pending in court at this time? Yes\_\_\_\_ No\_\_\_\_

If yes please explain: \_\_\_\_\_

Are you a Veteran of U. S. Military Service? \_\_\_\_\_ If yes Branch: \_\_\_\_\_ Job: \_\_\_\_\_

Education: Highest grade completed: \_\_\_\_\_ Diploma/degree: \_\_\_\_\_

Name of school diploma/degree is from: \_\_\_\_\_

Summarize any special skills or qualifications you have acquired from employment or other experience: \_\_\_\_\_

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

List three references that live in the town of Cherokee or West Colbert County other than family members:

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Do you now or have you ever had heart or lung problems? \_\_\_\_\_. If yes explain: \_\_\_\_\_

Do you now or have you ever had a hernia or back problems? \_\_\_\_\_. If yes explain: \_\_\_\_\_

Do you use alcoholic beverages or use non-prescription drugs? \_\_\_\_\_. If yes explain: \_\_\_\_\_

If you have a drug or alcohol problem you are not eligible for membership. If you have dealt in any illegal substances, disqualify yourself at this point.

If married have you discussed this decision with your spouse? \_\_\_\_ Yes \_\_\_\_ No If yes please give his/her reaction. \_\_\_\_\_

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Will your work schedule prohibit Thursday evening training? Yes \_\_\_\_\_ No \_\_\_\_\_

Will you attend weekly and special training unless your health or work schedule prohibits? Yes \_\_\_\_\_ No \_\_\_\_\_

Will you respond to all calls possible both day and night? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you able to take orders from others? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you get along well with others? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you fear high or small places? Yes \_\_\_\_\_ No \_\_\_\_\_

In emergency situations I have been faced with I: \_\_\_\_\_ remained calm \_\_\_\_\_ am nervous \_\_\_\_\_ am uncertain \_\_\_\_\_ Panic prone.

I would risk my life for a fellow firelighter, or anyone else, be they black, white, or otherwise. \_\_\_\_ Yes \_\_\_\_ No

If accepted and issued equipment, I will maintain it and will turn in all equipment in the event I leave, retire, or am asked to do so.

\_\_\_\_ Yes \_\_\_\_ No

I understand if accepted I am not to use a red light, or any warning device when responding during my rookie year, and I am to obey all speed laws and operate my vehicle with safety when responding to an alarm. \_\_\_\_ Yes \_\_\_\_ No

I understand appropriate clothing is to be worn at the fire station, which includes, shirt, and shoes. I also understand I am not to respond to a fire without full turnouts. \_\_\_\_ Yes \_\_\_\_ No

I understand the fire station is not a place to "hang out" with my friends. Non fire department personnel are not to be permitted at the station. Nor will I bring my girl friends, or other non-authorized personnel to the station at any time, whether I am a rookie or Fire Fighter. Authorized personnel include your wife and children. I fully understand this statement. \_\_\_\_ Yes \_\_\_\_ No

### AGREEMENT

I certify that all answers given here in are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for membership as may be necessary in arriving at a membership decision.

In the event of acceptance for membership into the Cherokee Volunteer Fire Fighters Inc., I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Cherokee Volunteer Fire Fighters Inc.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_