

Background Information

Have your driving privileges ever been revoked? If yes, please explain. [] Yes [] No

Have you ever had any traffic violations? If yes, please explain. [] Yes [] No

Have you had any accidents in the past three years? If yes, please explain. [] Yes [] No

Have you ever been convicted of a crime? If yes, please explain. [] Yes [] No

Do you have any disability which the Squad should be aware of? If yes, indicate what duties you can fulfill. [] Yes [] No

Have you ever had any first aid or medical experience? If yes, please explain. [] Yes [] No

What prompted you to apply for membership on the Squad?

Have you ever belonged to a First Aid or Rescue Squad?

[] Yes [] No

If yes, please provide

Squad Name and Address

Contact Name _____ Telephone _____

Member From _____ to _____

Why did you leave?

Certifications (If you answer YES, please attach copy of each card)

Do you have a current CPR card? [] Yes [] No

Do you have a current Standard First Aid or First Responder card? [] Yes [] No

Do you have a current EMT card? [] Yes [] No

If you are not yet certified, the Squad will help you get certified once your membership application is accepted.

References Please list name, address and telephone number of three personal references, i.e., local people, if possible.

1. _____

2. _____

3. _____

Do you know one or more members of the Squad? If yes, provide member name. [] Yes [] No

1. _____
2. _____
3. _____

Agreement

If acceptance is obtained under this application, I agree to comply with all New Jersey State Law requirements, the Ordinances of the Boro of Monmouth Beach and the By-Laws of the Monmouth Beach First Aid Squad. I understand that all new members shall be on probation for one year from date of approval. The answers to the foregoing are true to the best of my knowledge and belief and that the signature below is my own and in my handwriting. It is understood that any false statement on this application is sufficient cause for rejection or dismissal.

Consent and Authorization

The Monmouth Beach First Aid Squad reserves the right to verify, through lawful sources, the information provided by the applicant, including the substantiation of any statements concerning the applicant's previous criminal record or background, if any.

The applicant, in submitting his or her application, is expressly aware of such procedure and hereby consents to and authorizes the Squad, its agents and officers, to verify by the appropriate means any information furnished by the applicant to be a volunteer on the Monmouth Beach First Aid Squad.

(Privacy Act 1974; Public Law 93-579)

Signature _____ Date _____

Print Name _____

For Official Use ONLY — Please DO NOT write in this space

Application read at the _____ MBFA Meeting

Membership Committee contacts

- Prior Squad Affiliations Yes _____ (date) No
- References Yes _____ (Names) No
- MBFA Squad member(s) known to applicant Yes _____ (Names) No
- And results presented at the _____ MBFA Squad Meeting

sign) _____, Membership Chairperson
(print) _____ Date _____

Application to Squad President, who forwards to MB Police Department
(sign) _____, President
(print) _____ Date _____

Monmouth Beach POLICE DEPARTMENT

Background Check results/conducted Approved Rejected
By _____ Title _____ Date _____

Applicant's membership status as of _____ MBFA Meeting

Approved: Date: _____

Denied: Date: _____

Reason _____

Applicant notified in writing by Membership Committee Member on _____ of decision.