



Howard Volunteer Fire Department

HVFD Fire/Rescue

P.O. 150 Howard Colorado 81233

Phone: 719- 942-HVFD

E-mail: HVFD@Howard-us.co

Personal Record and Application

Instructions: Please print all information and write as legible as possible. All questions with *** must be answered. Answer all other questions to the best of your knowledge and ability. All information is for the Howard Volunteer Fire Department only. Any false or misleading information may be cause for rejection of this application.

District I.D. # (assigned by the District Chief) _____

***Name: _____

***Physical

Address: _____

Mailing address: _____

City: _____ State: _____ Zip Code: _____

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

E-Mail Address: _____

Emergency Contact: Name: _____ Phone: _____ Relationship: _____

*** Age: _____ Date of Birth: _____ *** SSN: _____ Sex: _____

*** Drivers License #: _____ Expiration Date: _____ Type: _____

Height: _____ Weight: _____ Blood Type: _____ Race: _____

District position applied for: _____ Firefighter _____ EMT

Firefighter Cert. #: _____ EMT Cert. # _____ Expiration Date: _____

C.P.R. Exp. Date: _____

Start Date: _____ Termination Date: _____

Special Skills or Certifications:

Education

Total Years of Education: _____

Schools

High School:

College:

Tech School:

Degrees Earned:

*** Do you have any physical limitations we should be aware of? (A physical examination may be required by the District)

*** Have you ever been convicted or given a deferred judgment for a crime? _____
Please explain:

*** Have you ever been convicted of a Felony? _____
Please Explain:

*** Do you have any other limitations which may interfere with required participation in District activities? (Work, religion, spouse, etc.)? _____
Please explain:

I hereby certify that all questions were answered to the best of my knowledge. I understand that a background check will be required, and a physical examination may be required and any false or misleading information may be cause for rejection of my application. I also understand my application may be kept on file until such time as there may be an opening in the District.

Signature: _____

Date: _____