Greene County Fire Investigation Team

Organized 1992

MEMBERSHIP APPLICATION

PLEASE PRINT LEGIBLE					
NAME:	SOCIAL SECURITY #:		_	PHONE #:	
DDRESS:		CITY:		STATE:	ZIP:
EMAIL:		OCCUPATION:			AGE:
PLACE OF BIRTH: City State			DATE OF BIRTH:		
DRIVERS LICENSE #:			EXPIRATIO	ION DATE:	
LIST ANY PREVIOUS EXPERIENCE YOU MAY HAVE: Information must be valid and verifiable.					
WHAT POSITION ARE YOU VOLUNTEERING FOR?					
*C&O Technician **C&O Specialist ***C&O Investigator					
See Required training and qualification bellow					
DO YOU HAVE ANY PHYSICAL IMPAIRMENT OR CONDITION THAT WOULD PREVENT YOU FROM PERFORMING THE					
DUTIES FOR WITCH YOU APPLY? YES NO If yes, Please explain:					
NOTE APPLICANTS SHALL BRING THE FOLLOWING AT THE TIME OF THE INTERVIEW					
Driver License	Letter	of approval by Appli	cants Chie	f State	Fire Certificates
To the Applicant: The following apply to all new members if their application is accepted. All members must be active, Class A members of a Firematic Service in Greene County, NY. Members must be 18 years of age at the time of joining. If for any reason your membership lapses, you will not be able to continue your membership with GCFIT. Consideration is based on the following criteria: Availability, Personal character and reputation, Willingness to learn and train, Willingness to travel within the boundaries of Greene County, NY. REQUIRED TRAINING AND QUALIFICATION *C&O Technician include: BEFO or the equivalency, and within a year of joining or subject to availability Fire Investigation for the Line Officer. C&O Technician are not allowed to investigate any fire without the direct supervision of a C&O Specialist, or Investigator. **C&O Specialists include: Fire Investigation for the Line Officer or the equivalency, and within a year of joining or subject to availability, Introduction to Fire Investigation (01-01-0040), and / or FBAA/Principles of Fire Investigation. ***Fire Investigator include: Fire Investigation (01-01-0041) Pro Board Fire Investigator National Certification, and Eighty (80) hours of documented fire origin and cause investigation activity, and / or Fire Arson Investigation. BY APPLICATION OF MY SIGNATURE I AM ALLOWING THE GREENE COUNTY SHERIFF TO INVESTIGATE MY BACKGROUND AND DRIVING RECORD. I DECLARE THAT I HAVE READ AND UNDERSTAND THE MEMBERSHIP					
REQUIREMENTS:		Drinte			Data
Applicant's Signature:		Print			Date:
	DO NO	OT WRITE BELOW 1	THIS <u>LINE</u>		
Membership Vote: PASS FA	IL Date	e of Vote:			

All applicants will be subject to a background check (criminal), drug screening and physical exam. Residency within Greene County, NY is a requirement.