

Dunn's Corners Fire Department

Serving Westerly & Charlestown Since 1942

Chief Michael J. Frink

Volunteer Membership Application Instructions:

Dear Applicant,

Thank you for applying for volunteer membership in the Dunn's Corners Fire Department (DCFD)! We look forward to working with you in one of the best volunteer fire rescue services in the state. Becoming a member of our department is a 3 step process and is easy to complete. First, please fill out the application package attached to this letter and return the completed application to us. Next, you will be asked to meet with our Membership Committee to discuss your application, explain the requirements of being a member in our department and answer any of your questions about becoming a member. Lastly, your membership application will be put to a vote to the DCFD membership at one of our monthly meetings for member ratification.

Do not get concern about the process of becoming a member, we need all types of volunteers and are glad you are interested in our department. The first Wednesday of every month is our monthly department meeting held at 7:00pm at the Dunn's Corner Fire Station, you are welcome to attend and meet with the rest of department members. Hope to see you at next month's meeting!

Membership Application Package:

The membership application is attached to this letter. The membership application has 3 parts to it; the Application form, 2 Letters of Reference Forms and a Westerly Police BCI form. Please follow the instructions below:

Application Form: Fill out this form completely and please sign the form. If you are unsure about your response to a question on the form, leave it blank and the DCFD Membership Committee will review it with you during your interview.

Letters of References: 2 blank Letters of Reference forms are included for your application. These forms can be filled out by any individual over the age of 18 years. Please return these two Letters of Reference with your application.

Westerly Police Department BCI Form: All applicants over the age of 18 years must complete a criminal background check form with the Westerly Police Department (WPD). Fill out the BCI form, have it certified by the WPD and return it with your application form. The DCFD will refund you the cost of the BCI. However, if you have any out of state convictions, you must get the BCI from that state and bear the cost of the out of state BCI.

Once you have completed all 3 parts of the Membership Application package, please drop it off or mail it to us at Dunn's Corner Fire Department, 1 Langworthy Road, Westerly, R1 02891.

Sincerely yours,
The Membership Committee
Dunn's Corners Fire Department

Station # 1
1 Langworthy Road
Westerly, R.I.
02891

www.dunnscornersfire.com
Tel: (401) 322-0577
Fax: (401) 322- 9304

Station #2
5664 Post Road
Charlestown, R.I.
02813

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Membership Application

Today's Date: ___/___/___

This application must be filled out completely and signed by the applicant

Name: First: _____ M Initial: ___ Last: _____

Address: _____

Telephone: (Home) _____ (Cell) _____

Email: _____ Cell Carrier: _____

Date of Birth? ___/___/___ Are you Currently Employed? YES NO

If employed, please provide the following information:

Employer: _____

Address: _____

Work Telephone Number: _____

When are you generally available to volunteer your services? DAYS/EVENINGS/NIGHTS/WEEKENDS

Why do you wish to join the Dunn's Corners Fire Department?

Background:

Where you ever a member of the Dunn's Corners Fire Department? YES NO

If so, When? _____

Do you have any previous fire/rescue related experience? YES NO

If you had any previous experience; please list what, where and

when: _____

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Though the Dunn's Corners Fire Department will provide all necessary training, please list any previous training you have had at any time: (Please attach photocopies of all certifications listed)

Training	Training Where	Expiration Date
CPR		
First Aid		
EMT-B # _____		
EMT-C # _____		
Firefighter 1		
Firefighter 2		
Other		

Summarize any training, skills, licenses and/or certifications that may qualify you as being able to perform job-related functions for membership in the Dunn's Corners Fire Department.

Please select the highest level of education/degrees received:

High School 9 10 11 12
High School Attended _____
College 1 2 3 4 5+
College Degree _____
Colleges Attended _____

Please detail any non-fire related training or experience that may be relevant to the position of membership within the Dunn's Corners Fire Department:

Have you ever been convicted of any crime in Rhode Island or elsewhere? YES NO

(Conviction of a crime does not automatically preclude you from DCFD membership)

If YES, please explain:

IS it OK if we request a criminal background check on you? YES NO

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Driving Record:

Do you have a valid driver's license? YES CDL NO

Rhode Island License Number _____ Expiration _____

Or Other State License Number _____ Expiration _____

Please list any moving violations that you have had in the past 18 months:

Date of Violation	Offense	Date of Conviction	Court and Location

Please list any accidents that you have had in the past 3 years:

Date of Accident	Location of Accident	Charges

Personal References: Please fill out the next two forms in the packet for personal references. There is a minimum of two required, and without them, the application process will be held up.

Signature:

If accepted into membership of the Dunn's Corners Fire Department, I understand that I must abide by the rules and regulations of the department/district or my membership may be terminated.

I hereby certify that, to the best of my knowledge, all of the information in the application is true and complete. I hereby give consent to the Dunn's Corners Fire Department and its representatives to verify this information by any means, including background check. I understand that if I am accepted for membership in the Dunn's Corners Fire Department and this information is subsequently found to be incomplete or inaccurate, I could be subject to disciplinary action and/or expulsion from the department.

Upon resignation/termination of my membership, I will return any and all Dunn's Corners Fire Department/District property in my possession, including but not limited to: Dunn's Corners Fire District issued uniforms, coats, jackets, turnout gear, keys, pagers and radio equipment.

Signature _____ Date ___/___/_____

Printed _____

Official Use Only

Application Received ___/___/_____

Committee Reviewed ___/___/_____

Back Ground Check ___/___/_____

Interview ___/___/_____

Body Meeting ___/___/_____

Who Received _____

ACCEPT REJECT TABLE

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Personal Reference Letter Form

Dear Sir or Madam,

This person you are providing this reference for is in the process of applying for membership in the Dunn's Corners Fire Department, The applicant has chosen you as a person qualified to render a fair opinion of the suitability for membership.

Please complete and sign this form as soon as possible. The applicant will not be considered for membership until we have received your letter of reference. This information will be held in the strictest confidence.

The letter is in reference for: _____

Your Name: _____

Address _____

Phone Number: _____ Best Time to call if needed? _____

In what capacity do you know this person?

How long have you known this person? _____

Do you recommend this person for membership in the Dunn's Corners Fire Department? YES NO

Please explain why you recommend or do not recommend this person for Dunn's Corners Fire Department membership:

Signature _____

Date ___ / ___ / _____

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Date ___ / ___ / _____

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