



LAUDERHILL FIRE-RESCUE

Application for Community Emergency Response Team Volunteer

Name (last) _____ (first) _____ (m.i.) _____

Present Address (number/street) _____ (city) _____ (state/zip) _____

Telephone (home) _____ (cell) _____ (business) _____

Do you have a valid Florida Drivers License? ____ yes ____ no _____
(DL number)

Do you have transportation ____ yes ____ no

Level of Education (circle one) HS Some College College Degree Advanced Degree

List any language, other than English, that you speak fluently:

Previous Volunteer Experience (most recent first):

Agency	Address/Phone	Supervisor	Dates
1			
2			

Work Experience: _____
(Most recent or current job) (Company)

Address (number/street) _____ City _____ State/zip _____

(Phone number) _____ (Supervisor) _____

Have you ever been arrested? ____ Yes ____ no if yes, please explain: _____

In case of emergency, please contact: _____

Relationship: _____ Phone Number: _____

As an applicant for a volunteer position with the City of Lauderhill, I am willing to furnish information for use in determining my qualifications. I authorize release of any and all information that may be available concerning me, including information of a confidential or privileged nature.

I hereby release the City of Lauderhill and others from liability or damages which may result from furnishing the information requested.

I understand that a background check will be conducted prior to my acceptance as a volunteer for the City of Lauderhill. I acknowledge that I may be asked to supply additional information or submit to a fingerprint check if I am assigned to a position requiring security clearance.

Signature _____ Date _____

LAUDERHILL FIRE-RESCUE
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