



# Deer Lake Fire/Rescue

6A Crescent Street

Deer Lake, NL

A8A 1E9

635-3411 or 635-2451



## Firefighter Application / Deer Lake Fire Dept.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Present Employment: \_\_\_\_\_

Business Phone #: \_\_\_\_\_

Approval From Employer: (To Attend Calls) \_\_\_\_\_

Reason For Joining Fire Dept: \_\_\_\_\_

Previous Fire Fighting Experience: YES: \_\_\_\_\_ NO: \_\_\_\_\_

If Yes Explain: \_\_\_\_\_

\_\_\_\_\_

Do You Have First Aid: YES: \_\_\_\_\_ NO: \_\_\_\_\_

If Yes Explain: \_\_\_\_\_

Education: \_\_\_\_\_

I) Do You Have A Drivers Licence: YES: \_\_\_\_\_ NO: \_\_\_\_\_

If Yes Fill Out Section II)

II) 1) Licence #: \_\_\_\_\_

2) Class Of Licence: \_\_\_\_\_

3) Years Of Experience: \_\_\_\_\_

4) Do You Own A Vehicle: \_\_\_\_\_

Do You Have Any Physical Disabilities: YES: \_\_\_\_\_ NO: \_\_\_\_\_

If Yes Explain: \_\_\_\_\_

Do You Have Future Plans To Move Away: YES: \_\_\_\_\_ NO: \_\_\_\_\_

Are You Claustrophobic: YES: \_\_\_\_\_ NO: \_\_\_\_\_

Are You Afraid Of Heights: YES: \_\_\_\_\_ NO: \_\_\_\_\_

Signature: \_\_\_\_\_