



# STONE BANK FIRE DEPARTMENT

W335 N7107 Stone Bank Road ~ Oconomowoc, WI 53066

Phone: (262) 966-2414 ~ Fax: (262) 966-2831

Date Application Received: \_\_\_\_\_  
System Entry: \_\_\_\_\_  
Membership active start date: \_\_\_\_\_

## MEMBERSHIP APPLICATION

**INSTRUCTIONS TO APPLICANT:** Please read through the entire application before answering. Answer all questions completely, by typing your responses or printing in ink. Failure to answer all questions completely may result in rejection of the application. All information will be kept confidential.

## PERSONAL INFORMATION

Full Name: \_\_\_\_\_  
*Last* \_\_\_\_\_ *First* \_\_\_\_\_ *M.I.* \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address* \_\_\_\_\_ *Apartment/Unit #* \_\_\_\_\_

\_\_\_\_\_ *City* \_\_\_\_\_ *State* \_\_\_\_\_ *ZIP Code* \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

SSN or Govt ID #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

## JOB HISTORY (MOST RECENT POSITIONS)

Job Title: \_\_\_\_\_ Employee ID: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Department: \_\_\_\_\_

Work Location: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Job Title: \_\_\_\_\_ Employee ID: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Department: \_\_\_\_\_

Work Location: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

**ADDITIONAL JOB HISTORY - FIRE/EMS HISTORY**

Title: \_\_\_\_\_ Employee ID: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Department: \_\_\_\_\_  
Work Location: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_

Title: \_\_\_\_\_ Employee ID: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Department: \_\_\_\_\_  
Work Location: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_

**MILITARY SERVICE**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_  
If other than honorable, explain: \_\_\_\_\_

**EDUCATION**

High School: \_\_\_\_\_ Address: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_  
College: \_\_\_\_\_ Address: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_  
Other: \_\_\_\_\_ Address: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

List of Fire/EMS Certifications. If other than Wisconsin indicate state:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## REFERENCES

Name:	_____	Relationship:	_____
Address:	_____	Years Known:	_____
Location:	_____	E-mail Address:	_____
Phone:	_____	Cell Phone:	_____
Name:	_____	Relationship:	_____
Address:	_____	Years Known:	_____
Location:	_____	E-mail Address:	_____
Phone:	_____	Cell Phone:	_____
Name:	_____	Relationship:	_____
Address:	_____	Years Known:	_____
Location:	_____	E-mail Address:	_____
Phone:	_____	Cell Phone:	_____

## APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for a position as a member of the Stone Bank Fire Department as may be necessary in arriving at a membership/service decision.

I agree to abide by the Stone Bank Fire Department's rules, regulations, and expectations.

**SIGNATURE OF APPLICANT:** \_\_\_\_\_

**PRINTED NAME OF APPLICANT:** \_\_\_\_\_

**DATE:** \_\_\_\_\_



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## COMMITMENT & RELEASE

As a candidate for a Stone Bank Fire Department, I will agree to the following commitments and policies:

- I will allow Stone Bank Fire Department to check my driving record and conduct a criminal records history background check.
- I understand that Stone Bank Fire Department respects its patient's, staff and member's rights with regard to privacy of information and I agree to respect these rights in the performance of my duties and to keep "professional" confidentiality in all my statements outside the department.
- I understand and will follow all departments' policies, procedures, and bylaws including those involving alcohol and drugs.
- I further understand that I am subject to random drug testing at any point during my probation as well as during active membership/employment.
- I am willing to take a physical, which will include a tuberculosis test, Hepatitis B vaccination series and other various required laboratory tests.

I understand that if I do not agree to the above commitments and policies, that my refusal will exclude me from consideration as a member/employee for Stone Bank Fire Department.

This information is of a confidential nature, and as such will not be shared with other personnel except for those involved in this specific record keeping area. All information collected will be kept confidential.

**SIGNATURE OF APPLICANT:** \_\_\_\_\_

**PRINTED NAME OF APPLICANT:** \_\_\_\_\_

**APPLICANT DATE OF BIRTH:** \_\_\_\_\_

**DATE:** \_\_\_\_\_



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## NEW MEMBER EXPECTATIONS AGREEMENT

- Complete application and return to Chief or Designee.
- Interview with the Chief. Review of Recruit Checklist.
- You will be notified of where a copy of the By-laws and S.O.G/P.'s can be found.
- You will be outfitted with: (Given out at different times – not all at once.)
  - Turnout gear
  - Boots, helmet and gloves
  - Uniform T-shirt, Job shirt, Uniform Polo, Winter Hat and Baseball Cap
  - Pager
  - Department Access (Key card and Fob)
  - Badge
  - Jump Kit (EMS Only)
- Monthly schedule as follows (Times are subject to change):
  - 1<sup>st</sup> Monday: 7:00 p.m. Business meeting
  - 2<sup>nd</sup> Monday: 7:00 p.m. Training
  - 3<sup>rd</sup> Monday: 7:00 p.m. Training
  - 4<sup>th</sup> Monday: 7:00 p.m. Training
  - 5<sup>th</sup> Monday: TBT
- All members and staff will take CPR and each member will become involved in a CPR refresher every two years.
- EMTs will be required to become involved in a refresher every two years. As well as have 10 patient contacts prior to being on any 2-man crews. (Officer assessment may change contact amount)
- Any member who misses three consecutive meetings and/or attends less than 6 trainings (Per OSHA guidelines) per year may be dropped from the department unless excused by the Chief or Designee.
- You will be required to attend classes in Firefighter 1 or EMT Basic at a minimum, if you have not previously completed the course. The assigned officer will inform you of the times and dates of such classes. The fire department will pay for these classes and the books.
- Various classes are offered, and notices will be posted on the bulletin board.
- All minutes, notices, and calendar of events will be available on the server, online, and/or posted as to make them available for all members upon request.
- All members and staff will answer all calls as soon as possible or to the best of their availability.
- All members and staff shall be suitably dressed before reporting for duty and training.
- No member or staff shall leave the scene of any call or training until the officer in charge has excused him or her.
- All members and staff shall assist in the work of the department whether it is assigned, elected or appointed duty.

- No member or staff shall appear on the scene or at meeting under the influence of Drugs/Alcohol, nor will he/she use insulting or indecent language.
- No member or staff will drive a vehicle under the influence of drugs/alcohol.
- All persons driving or operating any department vehicle must be trained before authorization can be given for such operation.
- All members and staff are required to participate in a Fire and/or EMS Orientation prior to attending any call or on duty position.
- Members and staff, when scheduled for duty, are to be on call or find a replacement and notify the officer of the crew of such change.
- All injuries, regardless of how minor, shall be reported immediately to the officer in charge.
- All members and staff must be able to fulfill any and all job-related tasks assigned to them.
- Leave of absence is granted for the following reasons:
  - Injury or illness
  - Out of town for more than a month
- I understand that my employment is terminable at will, either by Stone Bank Fire Department, or myself, regardless of the length of my employment.
- I am aware that during the course of my employment, patient confidentiality is critical to the patient and community. I understand that this information must NOT be disseminated outside the Stone Bank Fire Department premises unless patient information is given to the emergency department staff or patient has signed a release.
- If you resign or retire from the department all equipment, keys, badges, etc. will be returned. A letter of resignation giving reason is required. (A form is in the office.)
- All other Rules and Regulations can be found under the Stone Bank Fire Department's SOG's and SOP's. (Standard Operating Guidelines/Procedures)

*I understand that my signature below indicates that I have read and understand the above statements and have been notified of where to find the Stone Bank Fire Department By-laws, Rules & Regulations manual.*

**SIGNATURE OF APPLICANT:** \_\_\_\_\_

**PRINTED NAME OF APPLICANT:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

Updated February 7<sup>th</sup>, 2019