

Employer: _____

How long have you been employed: _____

Do you have a criminal record? Yes No If Yes, Explain: _____

Do you have any physical or medical limitations: Yes No

*This information is needed to determine appropriate assignment within the team.

If Yes, Explain: _____

Why do you want to join the Volunteer Corps program? _____

Do you have any previous volunteer experience? If so, please explain: _____

List any related training or classes which you have successfully completed and can provide Documentation and/or certificates for:

All personal equipment used in any operations is required to have full coverage insurance that is appropriate to the equipment type. Natrona County Insurance coverage is either limited, or not applicable, in many areas in regards to your personally owned equipment. Any vehicle you drive to call out location(s), from the time you are called out to the time you are dismissed, must carry an appropriate level of insurance coverage.

I understand the above statement:

Signature: _____

Please list the vehicles(s) you intend to use for Volunteer Corps operations:

<i>Vehicle</i>	<i>Insurance Company</i>	<i>Policy Number</i>

The undersigned states the above information is true and correct. Any falsification, or omission, of information is cause for denial of application. I further understand the information provided in this application will be used for a background investigation to determine eligibility. All application information will be kept confidential.

Signature: _____ **Date:** _____