



GASTON RURAL FIRE DISTRICT

102 EAST MAIN ♦ GASTON, OR 97119
TELEPHONE (503) 985-7575 ♦ FAX (503) 985-7382

Department Information

Department: _____ Phone Number: _____

Volunteer: _____ Paid: _____ (check one)

Years of service: _____ Rank: _____

Training Officer: _____

Experience

Please list all training and certificates that relate

* Please attach copies of any certificates.

Legal Record

Please list all driving citations you have received within the last three years and give a brief description of each.

1. _____
 2. _____
 3. _____
 4. _____
-

Emergency Contact Information

1. Name: _____

Relation: _____

Phone (1) _____ Phone (2) _____



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2. Name: _____

Relation: _____

Phone (1) _____ Phone (2) _____

I certify the information in this application and attachments are true and complete to the best of my knowledge. I am aware that any falsification, misrepresentation, or omission may result in my disqualification for participation or discharge

All information provided to us will be treated as confidential and only available to authorized fire and emergency agencies.

I hereby waive my rights to claims or damages against any employer and GRFD, it's officers, agents and employees in regard to this exchange of information concerning my past history and employment.

My signature below indicates I have read and understand the foregoing statement. Further, I agree to all the provisions and requirements therein.

SIGNATURE _____ DATE _____