

GEYSERVILLE FIRE PROTECTION DISTRICT

Post Office Box 217
20975 Geyserville Avenue
Geyserville, CA 95441
Phone: (707) 857-3535 Fax: (707) 857-3366



Paul Pigoni - Fire Chief

FIREFIGHTER APPLICATION

Name Last: _____ First: _____ Middle: _____

Address: _____ City _____

State: _____ Zip _____ Are you 18 years old or older? _____

Home Phone: _____ Cell Phone _____

Social Security #: _____ Rate your physical condition _____

Length of time in the Geyserville Fire Protection District area? _____

Own and maintain vehicle in which to respond to calls? _____

Education level: _____

List any firefighting education _____

Employer: _____

Position: _____ Date Hired: _____

Address: _____

City: _____ State: _____ Zip: _____

Work Phone #: _____

Ability to respond from work: _____

Do you have past fire fighting experience _____? If yes, explain: _____

Do you have truck driving experience? _____

Have you had first aid training? _____

How were you introduced to the fire department? _____

Why do you want to be a volunteer firefighter? _____

Are you willing to respond to all types of calls including fires, medical aids, rescues,
vehicle accidents, etc.? _____ If no, explain _____

Hobbies and other interests: _____

References

Please list three references and their phone numbers (personal or work related):

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Signature

Date