



SACRAMENTO FIRE DEPARTMENT FIRE CORPS VOLUNTEERS APPLICATION OF INTEREST FORM



The Sacramento Fire Department appreciates your interest in our Fire Corps Volunteer Program. Volunteers support the Fire Department with non-emergency tasks so department members may better protect the community from and respond to fires, natural disasters, and other emergencies. Volunteers also provide a valuable service to the community in promoting public safety. In return, Volunteers gain a greater understanding of fire and emergency services and have the opportunity to offer their talents and learn new skills while serving the community.

There are excellent opportunities in many areas of the department for those who are interested in volunteering. Typical duties include but are not limited to: promoting fire safety and prevention in schools, maintaining reporting and statistical data, researching grant opportunities, assisting at community events, assisting administrative and clerical support, translating safety literature, developing brochures or safety articles for newsletters, photographing department events, and assisting logistics and equipment staff. An effort is made to place Volunteers in positions that best suit their availability and area of experience and interests.

Because Volunteers may work with confidential documents, all applicants are required to complete official application forms including a detailed background questionnaire. A background investigation is performed and applicants are fingerprinted.

Completing and returning the attached document is the first step in becoming a Volunteer for the Sacramento Fire Department. The document will be reviewed and a department representative will contact you with additional information on the next phase of the application process. Please complete the following form and return it to:

Sacramento Fire Department
Michelle Basurto, Volunteer Coordinator
5770 Freeport Blvd, Suite 200
Sacramento, CA 95822



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SECTION 1: PERSONAL

YOUR FULL NAME			
LAST	FIRST	MIDDLE	
OTHER NAMES, INCLUDING NICKNAMES, YOU HAVE USED OR BEEN KNOWN BY			
ADDRESS WHERE YOU RESIDE			
STREET			APT/UNIT#
CITY/STATE/ZIP			
MAILING ADDRESS, IF DIFFERENT FROM ABOVE			
CONTACT NUMBERS			
HOME () - () - ()		WORK () - () - ()	
OTHER () - () - ()		<input type="checkbox"/> CELL <input type="checkbox"/> FAX <input type="checkbox"/> PAGER	
EMAIL ADDRESS			
HOME		BUSINESS	
DATE OF BIRTH		PLACE OF BIRTH	
LIST ALL LANGUAGES, OTHER THAN ENGLISH, WHICH YOU SPEAK, READ, OR WRITE FLUENTLY.			
LANGUAGE	SPEAK	READ	WRITE
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LIST ANY PHYSICAL OR HEALTH RESTRICTIONS THAT WOULD LIMIT YOUR ABILITY TO VOLUNTEER:			
LIST ANY SKILLS OR TALENTS YOU POSSESS THAT MAY HELP TO PLACE YOU IN AN APPROPRIATE POSITION:			
EXPLAIN WHY YOU WANT TO VOLUNTEER WITH THE SACRAMENTO FIRE DEPARTMENT:			

SECTION 2: AVAILABILITY

DAYS AND HOURS YOU ARE AVAILABLE TO VOLUNTEER: <input type="checkbox"/> MONDAY FROM _____ TO _____ <input type="checkbox"/> TUESDAY FROM _____ TO _____ <input type="checkbox"/> WEDNESDAY FROM _____ TO _____ <input type="checkbox"/> THURSDAY FROM _____ TO _____ <input type="checkbox"/> FRIDAY FROM _____ TO _____ <input type="checkbox"/> SATURDAY FROM _____ TO _____ <input type="checkbox"/> SUNDAY FROM _____ TO _____	Do you have any particular expectations related to your participation in this program or a preference in the type of activities or projects that may be offered? If so, please describe:
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SECTION 3: VOLUNTEER EXPERIENCE

Have you had any previous volunteer experience? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please provide the following details:
ORGANIZATION:	ORGANIZATION:	
Address:	Address:	
Dates Volunteered: from to	Dates Volunteered: from to	
Estimate of Total Hours :	Estimate of Total Hours :	
Duties:	Duties:	

SECTION 4: WORK EXPERIENCE

Have you ever been employed by the City of Sacramento? Yes No If yes, please provide details:

PRESENT/MOST RECENT EMPLOYER INFORMATION	Title:
Name:	Duties:
Address:	
City/State/Zip:	
Phone:	
Dates Worked: from to	
Supervisor:	
May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for leaving:

FORMER EMPLOYER INFORMATION	Title:
Name:	Duties:
Address:	
City/State/Zip:	
Phone:	
Dates Worked: from to	
Supervisor:	
May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for leaving:

SECTION 5: EDUCATION AND TRAINING

Are you a High School Graduate or passed a GED test? Yes No

NAME OF COLLEGE OR UNIVERSITY OR BUSINESS, CORRESPONDENCE, TRADE, OR SERVICE SCHOOL:	MAJOR COURSE OF STUDY:	DIPLOMA, CERTIFICATE, DEGREE RECEIVED:

HAVE YOU EVER BEEN CONVICTED BY ANY COURT OF AN OFFENSE? YES___ NO___
 (You may omit minor traffic violations (fines of \$75 or less), any offense committed prior to your 18th birthday which was finally adjudicated in Juvenile Court or under a youth offender law, or any incident sealed under Welfare and Institutions code 781 or Penal Code Section 1203.45)

If yes, state what offense, when, where, and disposition of case: _____

PLEASE PROVIDE ANY ADDITIONAL INFORMATION YOU FEEL IS RELEVANT TO YOUR APPLICATION:

HOW DID YOU HEAR ABOUT THE SACRAMENTO FIRE DEPARTMENT VOLUNTEER PROGRAM?

As a volunteer for a position with the Sacramento Fire Department, I am willing to furnish information for use in determining my qualifications. I authorize release of any and all information that you may have concerning me, including information of a privileged nature. I authorize the City of Sacramento Fire and/or Police Department to secure information from the references I have provided. I hereby release you, your organization, or others from liability for damage, which may result from furnishing the information required. I understand that for security reasons a basic clearance check will be conducted and I will be fingerprinted. Further background will be required if a specific volunteer assignment calls for a full security check. This may include a polygraph.

I hereby certify that all statements and answers on this form are true and complete.

**SIGNATURE
OF APPLICANT:**

DATE: