

**MASON COUNTY FIRE PROTECTION DISTRICT NO. 4  
APPLICATION**

**Paid** position applying for: Part-Time FF/EMT \_\_\_\_\_ Full-Time FF/EMT \_\_\_\_\_ Other \_\_\_\_\_

**Volunteer** position applying for: Firefighter: \_\_\_\_\_ EMT: \_\_\_\_\_ Wildland FF: \_\_\_\_\_ Support: \_\_\_\_\_  
(please check all positions that apply)

Name \_\_\_\_\_ Mailing Address \_\_\_\_\_  
City ZIP

Physical Address (if different from mailing address) \_\_\_\_\_  
City ZIP

How long at present address \_\_\_\_\_ Home owner? \_\_\_\_\_ First aid card? \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Email \_\_\_\_\_

Are you over the age of 18? Yes \_\_\_\_\_ No \_\_\_\_\_

Highest educational level attained: (Check all that apply)

High School    College    Vocational    GED    Other \_\_\_\_\_

Present employer \_\_\_\_\_ Phone # \_\_\_\_\_ How long \_\_\_\_\_

Specific Duties performed: \_\_\_\_\_

If present employment is less than 5 years, please list past employment:

Employer \_\_\_\_\_ Phone# \_\_\_\_\_ How long \_\_\_\_\_

Employer \_\_\_\_\_ Phone# \_\_\_\_\_ How long \_\_\_\_\_

(If you need more space use back of application.)

Have you volunteered with Mason 4 in the past? \_\_\_\_\_ If yes, what years? \_\_\_\_\_

What position did you serve? \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

List any relatives that are or have been employed/volunteer with Fire District 4: \_\_\_\_\_

**Please list two references that *are not* family members:**

1. Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

2. Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

List any previous Firefighting/EMS experience. *Please include Department or Organization & years served:*

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**Attach relevant FF/EMT certificates and send in with this application.**

List other community activities/organizations you are involved with: \_\_\_\_\_

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Please state in your own words why you are applying for this position \_\_\_\_\_

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I HEREBY CERTIFY to the truth of the above answers, and that I am in good health to the best of my knowledge and belief. I understand and agree that all equipment and clothing issued to me is to remain the property of Fire District No. 4 and I will keep it clean and in good repair. I am to use this uniform and/or equipment on only while performing duties as a member or employee of MCFD4, I understand it is to be returned promptly upon my resignation or at the request of the Chief. I understand MCFD4 policies can be found at [www.masonfire4.com](http://www.masonfire4.com) and I will abide by said policies. I understand that my acceptance is at the sole discretion of the District Board of Commissioners, and I hereby authorize any investigation of my character and history, including employment, driving, and local, state, and national criminal records.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**\*\*\*\*Please fill out the BSA Universal Disclosure Release form and attach it to this application.**

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**DISTRICT USE**

Effective this date \_\_\_\_\_, \_\_\_\_\_ is a member of

Mason County Fire District No. 4.

Position \_\_\_\_\_

Effective \_\_\_\_\_

Change in rank to \_\_\_\_\_

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\_\_\_\_\_  
DISTRICT FIRE CHIEF