



SELKIRK FIRE DEPARTMENT

200 Eaton Avenue
Selkirk, MB R1A 0W6
Phone: 204-785-4965
Fax: 204-785-4966
selkirkfire@hotmail.com

Membership Application

PLEASE PRINT
ALL SECTIONS OF THIS APPLICATION MUST BE COMPLETED

NAME IN FULL: _____

ADDRESS: _____

PHONE #: _____ EMAIL: _____

BIRTHDATE (dd/mm/yyyy): _____ DRIVERS LICENSE #: _____

ARE YOU PRESENTLY EMPLOYED? YES / NO IF YES, WHERE? _____

HIGHEST LEVEL OF EDUCATION OBTAINED: _____

TRADES TRAINING OR OTHER CERTIFICATES/DESIGNATIONS: _____

PREVIOUS FIREFIGHTING EXPERIENCE, IF ANY? _____

OTHER TRAINING (ie CPR, First Aid, etc) _____

WILL YOUR EMPLOYER APPROVE OF YOU ATTENDING FIRE CALLS DURING YOUR NORMAL WORKING HOURS? _____ IF YES, A LETTER FROM YOUR EMPLOYER INDICATING SUCH WILL BE REQUESTED.

ARE YOU ABLE TO ATTEND FIRE CALLS 24 HRS PER DAY? _____

IF NO, PLEASE STATE WHEN YOU ARE ABLE TO ATTEND? _____

NOTE: SELECTED APPLICANTS WILL BE ASKED TO PROVIDE TWO (2) CHARACTER REFERENCES

- Applicants MUST RESIDE IN THE CITY OF SELKIRK and preference will be given to applicants who also work within the City.
- Applicants will be required to provide a driver's abstract, criminal record check, and child abuse registry check
- Applicants will be required to TAKE AND PASS ALL LEVEL 1 FIREFIGHTING EXAMS
- Applicants will be required to obtain a CLASS 4 DRIVERS LICENSE WITH AN AIR BRAKE ENDORSMENT
- All successful applicants will be on a PROBATIONARY PERIOD and will be expected to obtain all of the above requirements before the end of their probationary period.

Signature

Date