



Camrose County Fire Services

Application Form

All information received will be held in strict confidence in accordance with Federal and Provincial privacy laws. In order for the application to be considered, all sections must be fully completed.

Surname: _____ First Name: _____

Address: _____ Occupation: _____

Home Phone: _____ Work Phone: _____

E-mail: _____ Drivers Licence #: _____

Over 18 Years of Age: Yes No

Background Information: *Do you have any previous experience or related training that would be an asset to the fire department? (attach relevant documentation)*

- Are you willing to attend bi-weekly practice sessions? Yes No
- Will you participate in required training courses? Yes No
- Are you willing to undergo an RCMP criminal record check? Yes No

References: List (3) personal references (excluding relatives)

Name	Phone Number	How you know reference

All information provided is correct and accurate to the best of my knowledge

Signature: _____ Date: _____