



Houghton Fire Department
Application Packet for Membership

City of Houghton
616 Shelden Ave
Houghton, MI 49931



Houghton Fire Department
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Houghton, MI 49931

Criminal History Waiver

To whom it may concern,

I _____, hereby authorize the Houghton Fire Department to complete a criminal history background check as part of my application for membership within the department.

Printed Name

Signature

Date of Birth



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What are the requirements for joining the Houghton Fire Department and what training will I receive?

- Be a citizen of the United States and be at least 19 years of age or older
- Must pass law enforcement background check
- Possess a valid State of Michigan driver's license
- In accordance with the Firefighters Training Council Act – Act 291 of 1966:
All members must obtain Michigan State Firefighter 1 Certification within two years of appointment. Additional required training includes:
 - Hazardous Materials First Responder
 - Operations
 - Drivers Training
- Additional education is not required, but is encouraged by the department.

What is the time commitment to the Houghton Fire Department?

- Attend monthly meetings (1st Monday of each month)
- Attend and perform team duties one Sunday every five weeks
- Attend monthly training
- Attend any required outside training
- Attend and participate in fundraisers
- Participate in tournaments

Membership with the Houghton Fire Department is approved or denied following a vote by the members of the Houghton Fire Department.

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Volunteer Application Form

APPLICANT INFORMATION

| | | | |
|--------------------------------------|-------|------------|-----|
| Last | First | M.I. | DOB |
| Street Address | | | |
| City | State | Zip Code | |
| Home Phone | | Work Phone | |
| Cell Phone | | E-mail | |
| Employer | | | |
| Driver's License # and Issuing State | | | |

- Have you ever been convicted of a crime? Yes No If yes, please explain the nature of the offense:

- Do you have any previous firefighting experience? Yes No If yes, please explain: _____

- Do you hold Firefighting 1 and 2 certifications? Yes No If yes, from where? _____

- Do you have any physical limitations that would limit you from performing firefighting duties? Yes No If yes, please explain: _____

- Are you willing and capable of fulfilling the State of Michigan mandated training requirements? Yes No If no, please explain: _____

- Are you able to respond to all emergency calls? (24/7) Yes No If no, please explain: _____

- Are you able to attend monthly meetings and training sessions? Yes No If no, please explain: _____

- Are you able to attend all fundraising functions and community service activities? Yes No If no, please explain: _____

What is your reason for joining the Houghton Fire Department?

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to membership, I understand that false or misleading information on my application or during my interview shall be grounds for immediate dismissal.

Print Name _____ Date _____

Signature _____