



Bloomfield Volunteer Fire & Rescue Department
Bloomfield, IA 52537

Member Application (Please Print Legibly)

Miller John Douglas
Last Name First Name Middle Name

508 W Locust Bloomfield CT 052537
Address City State Zip Code

() () () ()
Home Phone Work Phone

Allysa Miller () ()
Emergency Contact Phone Relationship wife

1. Are you legally authorized to work in the U.S.? ☒ Yes ☐ No
2. Are you 18 years of age? ☒ Yes ☐ No
3. Do you have any physical or health limitations that could interfere with your performance in the duties for which you are volunteering? ☐ Yes ☒ No
(Note: Assignment is contingent on applicant meeting minimum physical/mental demands of the position).

If yes, please explain: _____

4. Do you have any commitments or responsibilities that might prevent you from meeting the requirements of volunteering? ☐ Yes ☒ No

If yes, please explain: _____

Education & Training

1. High School Francis T Maloney Diploma Did you Graduate? ☒ Yes ☐ No

2. College/Trade School _____ Subject Major: _____

Did you earn your degree? ☐ Yes ☐ No (Please provide a copy of diplomas)

3. Please list any skills which you feel relate to this position: HVFC

Volunteer Firefighter

4. Have you received Firefighter training in the past? ☒ Yes ☐ No

Type of Firefighter training: _____ Date: _____/_____/_____

5. Have you received first aid or CPR training in the past? ☐ Yes ☒ No

Type of training: _____ Date last certified: _____/_____/_____



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Member Application Continued

Availability and Employment History

1. What hours are you available to respond to emergency calls? Any
2. Approximate minutes from home to the Fire Station? 5 minutes
3. Approximate minutes from work to the Fire Station? 4 minutes
4. Can you be available for meetings as follows:

First and third Tuesday of every month from 7:00 p.m. to 9:00 p.m. ☒ Yes ☐ No

Training on weekends as scheduled. ☒ Yes ☐ No

5. Do you hold a current fire certification? ☐ Yes ☒ No
6. Can you attend a NFPA 1403 Basic (Essential) Training Program? ☒ Yes ☐ No

Present Employer: CASEY'S Supervisor's Name: Maddison

Address: 206 S Washington St Phone: (641) 664 1972

Bloomfield, IA 52537
Job Title: Store manager Date Employed: 05/05/2022

Total Years Employed: 1 Working Hours: 34.60

Specific Duties: Make Pizzas

Does business take you out of town? ☐ Yes ☒ No

If yes, how often and on average, how long? _____

7. Military service (if applicable): Branch of service NO Reserve status: _____
8. Any mechanical, electrical or other specialized work experience? ☒ Yes ☐ No
9. References – please list three references that are not related to you.

1. Name: Diana Boas Phone Number: (860) 301 06 89

Jonathan Macri
2. Name: Alysa Pat Phone Number: (860) 391-8835

3. Name: Kyle Everret Phone Number: (860) 573-8594



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In the space provided below, please use at least one half of the page to describe why you want to become a Firefighter. If more space is required feel free to use the back side of this page.

Ever Since I was 8 I wanted to join the fire department. Then when I heard that Haddam Volunteer Fire Department was looking for help I joined them because I wanna serve my ^{town} ~~community~~ because I love helping and saving people. Also I wanna make a career for myself and be the best fighter fighter I can be and be the next chief when its time.



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Acknowledged Requirements

I acknowledge and understand that application to become a firefighter with the Bloomfield Volunteer Fire & Rescue Department requires the following commitment:

1. Refer to volunteer policy.

Selected applicants will be subject to a 12-month probationary period with review after six (6) months. The following must be completed or accomplished during the 12-month probationary period:

1. Attend monthly meetings on the First and third Tuesday of every month from 7:00 p.m. to 9:00 p.m.
2. Attend training on weekends as scheduled, not to exceed more than 1 weekend every other month?

There will be additional training required after becoming an active member of the Fire Department. Firefighters will be required to:

1. Complete NFPA 1403 Basic (Essentials) course within the first two (2) years. Tuition paid by the Bloomfield Volunteer Fire & Rescue Department.
2. Complete Healthcare Provider level CPR within the first 6 months of joining.
3. Attend Hazardous Materials training (Awareness level). Within the first two (2) years.
4. Attend training as designated by the Fire Chief of the Bloomfield Volunteer Fire & Rescue Department.
5. Being a Firefighter is an emotionally challenging job and provides you with self-respect and self-satisfaction. Firefighting requires training and demands team effort and respect from each individual Firefighter on the Department.

I have read these requirements and agree to them.

Date: 6 / 23 / 2022 Signature of Applicant: John Miller

To be signed by Applicant's Employer

I Brendan Cox, the employer of John Miller agree to release said individual during work hours to respond to emergency calls within the Bloomfield Volunteer Fire & Rescue District.

List any restrictions: _____

Date: 06 / 23 / 2023 Employer Signature: Brendan Cox



**Bloomfield Volunteer Fire & Rescue Department
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The Department's Expectations of its Members

The Fire Department is an active, highly visible part of the City of Bloomfield. Due to the fact that a firefighter is placed in an environment where others personal property and safety are in jeopardy, the Department expects its members to be of high moral character and integrity.

As a member of the Bloomfield Volunteer Fire & Rescue Department it may be your responsibility to protect others assets and life, consistent with the following:

1. Your actions should in no way discredit the City of Bloomfield or the Bloomfield Volunteer Fire & Rescue Department.
2. Respect for others must be maintained by not using statements in public that will be construed by the public to be discriminatory or negate Department policy.
3. Put effort into becoming a member of the team; exhibiting a determination to bring the greatest harmony among the Department members.
4. Be willing to assume reasonable "extra" duties that will be of benefit to the Department and the citizens it serves.
5. Become familiar with the Department policies and standard operating procedures, which will be followed always.
6. Respond in a safe and efficient manner to fire and rescue situations.
7. Participate in special Fire Department events.
8. Be aware that emergency situations may occur at any hour of the day, and at any time of the year; thereby causing you to be separated from family and friends, occasionally at inopportune times.
9. As you are a member of a team effort; your opinions, views, talents and ideas are important for efficient Department functioning. Therefore, the membership encourages you to express your concerns and ideas without fear of personal incrimination.

I have read and understand what the Bloomfield Volunteer Fire & Rescue Department expects of me if I become a member of the Department.

Date: 6/1/23/2022 Signature of Applicant: [Signature]

Date: 6/23/22 Signature of Witness: [Signature]



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Waiver and Release

Please read each paragraph closely, initial each and sign below.

Jm I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I; the undersigned applicant has personally completed this application. I understand that any omission or misstatement of material fact on this application or any other document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Jm I hereby authorize the City of Bloomfield and Bloomfield Volunteer Fire & Rescue Department to thoroughly investigate my references, work records, education, driving record, criminal history background and other matters related to my suitability for employment. I further authorize the employers, schools and other references I have listed to disclose to the City of Bloomfield and Bloomfield Volunteer Fire Department all documents, transcripts, letters, reports and other information related to these references, without giving me prior notice of such disclosure. I hereby release the City of Bloomfield and Bloomfield Volunteer Fire & Rescue Department, my former employers, and all other persons, corporations, partnerships and associations from all claims, demands or liabilities arising out of or in any way related to such investigation or disclosures.

Jm I understand that nothing contained in the application, or conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between me and the City of Bloomfield and Bloomfield Volunteer Fire & Rescue Department, other than one that is "at will". I understand and agree that if I am employed; my employment will be of an "at will" nature, whereby either the employee or the City of Bloomfield and/or Bloomfield Volunteer Fire & Rescue Department may terminate the employment relationship at any time, with or without cause or notice. I further understand that my employment, if hired, is for no definite or determinable period of time and may be terminated at any time, at the option of either myself or the City of Bloomfield and/or Bloomfield Volunteer Fire & Rescue Department, and that no promise or representation contrary to the foregoing is binding on the Department unless made in writing and signed by myself and the Bloomfield Volunteer Fire & Rescue Department's acting Chief.

Jm I understand the following information will be used only for the purpose as aforementioned. And, that all records will be kept secure and confidential.

will be Transf

Driver's License Number: 0889 0889 46601 State of Issuance: CT

Social Security Number: 042-92-4611 (Please provide copy of DL & SS Card)

Date: 6/23/2022 Signature of Applicant: John Mullis

Date: 6/29/2022 Signature of Witness: [Signature]

