Volunteer Fire Department (VFD)
APPLICATION FOR MEMBERSHIP
11200 Santos Sanchez Bldg. B
Ysleta del sur Pueblo, TX 79927
915 858-1197
vfd@ydsp-nsn.gov

Dear Applicant,

Thank you for showing interest in YDSP Volunteer Fire Department. By picking up this application packet, you have shown that you have an interest in protecting and helping the citizens of this community. One must understand that by completing this application packet you will be accepting the responsibilities of this job which is an important and obligatory commitment.

Please read this packet carefully.

1. The application is for a volunteer organization and the information should be provided on a voluntary basis. If you need additional space to complete any of the questions, use a blank sheet of paper. If you have any questions feel free to contact me. Fill in ALL the blanks. Make sure the application is signed and dated. Any unsigned/incomplete applications will result in automatic dismissal.

2. Authorization for release of information: This allows the YDSP VFD to obtain any information on your application through a background check with city, state and federal law enforcement agencies.

3. The YDSP VFD is headed by a Fire Chief, who thereof, has the right to refuse or deny membership to any applicant.

Please complete this application packet to the best of your knowledge and sign all forms.

Respectfully,

Steve Cordova,
Fire Chief
YDSP Volunteer Fire Department
YDSP VFD
MEMBER APPLICATION

Please check the position you are applying for:

☐ Support/Amin. Staff  ☐ Firefighter  ☐ Emergency Medical Services

_________________________________________  ______________  ___________   ________________
Last Name First Name                                                Middle Name

_________________________________________  ___________________________  __________________________
Address                                                                                         City                       State                  Zip Code

Home/ Cell Phone                                                                 Work Phone                                                                 email address

__________   ____   _______________________   __________   ______________________________
Date of Birth       Age      Driver License Number                State                     Last four of S.S. Number

1. Are you a tribal member?  ☐ Yes Enrollment #________  ☐ No
2. Are you 18 years of age?  ☐ Yes  ☐ No, age _______

3. Do you have any physical/health limitations that could interfere with your performance on the job for which position you wish to volunteer for?  ☐ Yes, please explain in space provided below:  ☐ No

4. Do you have any commitments or responsibilities that might prevent you from meeting the job requirements? if Yes, Please explain in the space provided below:  ☐ No

5. Do you have any relatives in the YDSP Fire Dept.?  ☐ Yes, Who?________________________________       ☐ No

6. Have you previously applied for this position?  ☐ Yes, When?________________________________       ☐ No

7. Have you ever been convicted of a crime other than parking violations?  ☐ Yes,please explain in the space provided below:  ☐ No

Application date:  (office use only)
Start date:  (Office use only)
Availability and Employment History

1. What days are you available? ________________________

2. What hours are you available? ________________________

3. Have you ever volunteered/worked with another fire department? ☐ Yes, Please list the department : _____________________________________ ☐ No

4. FireDepartment

Present Dept: __________________________ Supervisor’s Name: __________________________
Address: __________________________ Phone: __________________________
Position: __________________________ Date(s) Promoted: __________________________
Total Yrs. in dept: __________________________ Duties: __________________________

Past Employer: __________________________ Supervisor’s Name: __________________________
Address: __________________________ Phone: __________________________
Job Title: __________________________ Date(s) Employed: __________________________
Total Yrs. Employed: __________________________ Duties: __________________________

Education and Training

1. Do you hold any current firefighter certifications? ☐ Yes ☐ No
If you answered “yes”, please explain:

2. Do you hold any current medical certifications? ☐ Yes ☐ No
If you answered “yes”, please explain:

3. Do you hold any specialty training that you can use in the fire service? ☐ Yes ☐ No
If you answered “yes”, please explain:
YDSP VFD Acknowledged Requirements

I acknowledge and understand that applicants for Firefighter/EMT with YDSP VFD will be obligated to:

1. Refer to and follow the YDSP VFD constitution, By-laws, S.O.P./Policies of this department.
2. Candidates will participate in a 12-month probationary period with 6-month period of training from a field training officer.

The following must be completed or accomplished during the 12-month probationary period.
1. Attend monthly meetings
2. Attend drills with the Fire Department.
3. Attend functions/Events of Fire Department.
4. Respond to all incidents
   *If unable to attend must provide an explanation for not attending. (missing 3 meetings will result in relinquishment of membership)

I understand that if I should be accepted as a member of the YDSP VFD I will uphold the constitution and by-laws of this department. I also agree to participate fully in all activities associated with the YDSP Volunteer Fire Department. I further agree that all statements and facts set forth in this application for membership are true to the best of my knowledge. I also understand that any false statement or misrepresentation will result in immediate dismissal from the YDSP VFD.

______________________________      ________________
Signature of Applicant   Date

EMERGENCY CONTACT INFORMATION

Primary Contact:

Last Name   First Name   Relationship

Street Address
City
State       Zip Code

Home Phone       Cell Phone       Work Phone

Secondary Contact

Last Name   First Name   Relationship

Street Address
City
State       Zip Code

Home Phone       Cell Phone       Work Phone
REQUIREMENTS FOR MEMBERSHIP TO THE YDSP VFD

FIREFIGHTER/EMT CADET:

* Must be at least 18 years of age.

* Must be a Legal Resident of the United States.

* Must provide a copy of Birth Certificate.

* Must provide a copy of social security card.

* Must provide a copy of state issued identification card/ driver license (Class B DL required).

* Must provide a copy of High School Diploma.

* Must provide a Resume.

* Must provide a copy of physical examination certification. (Not older than six months).

* Must sign criminal background check- see Tribal Clearance Agency

* Shall provide a copy of current Emergency Medical Services and Fire certifications (if applicable).

* Must provide a copy of current Shot record and TITERS.

* Must sign receipt of SOG, YDSP Policy Manual and Charter. (once membership is approved)

ALL of the above listed items must be attached to the application packet for membership consideration. All applications must be submitted at the YDSP VFD Headquarters located at 11200 Santos Sanchez, Ysleta del sur Pueblo, TX.

INCOMPLETE APPLICATIONS WILL RESULT IN AUTOMATIC DISMISSAL.

YDSP VFD Contact Information

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Ysleta del sur Pueblo, TX 79927
Office (915) 858-1197