



## KEARNEY VOLUNTEER FIRE DEPARTMENT APPLICATION FOR MEMBERSHIP

2211 Avenue A  
Kearney, NE 68847  
308-233-3226  
[KVFD@kearney.net](mailto:KVFD@kearney.net)

Dear Applicant:

Thank you for showing interest in your Kearney Volunteer Fire Department. By picking up this application packet, you have shown that you have an interest in protecting and preventing destruction to property and lives in this community. Upon completing this application packet, you should find this to be an important commitment.

Please read this packet carefully and in its entirety. It contains the following:

1. The Application is for a volunteer organization and the information should be given on a voluntary basis. Fill in ALL blanks. If you have questions on any item(s), please call this department. If you need additional space to complete any questions, use a blank sheet of paper. Make sure the application is signed. Any unsigned applications are not acceptable, and will result in automatic rejection.
2. Authorization for Release of Information: This allows the Kearney Volunteer Fire Department Investigation Committee to obtain any information on your application through law enforcement agencies.
3. If you have any additional skills or trainings you feel would be advantageous to this department, please provide Training Verification for our review. Example: CPR, EMT, First Responder, Firefighter 1.

Please complete this application packet to the best of your knowledge and sign all forms. If there are any questions concerning this packet, please contact the Kearney Volunteer Fire Department and leave your name, phone numbers and information needed. Someone will return your call.

Respectfully,  
Kearney Volunteer Fire Department

## REQUIREMENTS FOR MEMBERSHIP TO THE KVFD

### FIREFIGHTER:

- Citizen of the United States
- Legal resident of the KVFD district.
- Possess a valid Nebraska State Drivers license.
- Must be at least 21 years of age.
- Application must be accompanied with the appropriate membership fee to the Nebraska State Volunteer Firefighters Association.
- Application for membership must meet all application and induction requirements.
- Upon acceptance to the KVFD, you will be required to take a physical examination. This is paid for by the department.
- Also upon acceptance, member will be required to complete the department Firefighter 1 class. Member has the option to test for the State level Firefighter 1.
- Applicant must reside within two miles of the city limits.

If application is for the Riverdale Truck Company, the applicant must meet the above requirements in addition to living within a five mile radius of the Riverdale Fire Station in accordance with the department by-laws.

APPLICATION FOR MEMBERSHIP  
KEARNEY VOLUNTEER FIRE DEPARTMENT  
*(Please type or print all information)*

Date: \_\_\_\_\_

Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Birth Place: \_\_\_\_\_

Present Address: \_\_\_\_\_  
*(Number and street) (How long)*

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employer's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Does your employer support your applying for membership? \_\_\_\_\_

List three character references, outside family and Kearney Fire Department:

<i>(Name)</i>	<i>(Address, city, state, zip)</i>	<i>(Phone #)</i>
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<i>(Name)</i>	<i>(Address, city, state, zip)</i>	<i>(Phone #)</i>
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<i>(Name)</i>	<i>(Address, city, state, zip)</i>	<i>(Phone #)</i>
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Highest grade of education: \_\_\_\_\_

Are you a legal citizen of the United States? \_\_\_\_\_

How long have you resided in the KVFD fire district? \_\_\_\_\_

Do you work day time hours? \_\_\_\_\_ Evening hours? \_\_\_\_\_

Late night hours? \_\_\_\_\_ Weekends? \_\_\_\_\_

List all addresses in the previous five years (most recent first):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List all places of employment for the last five years to present date. Include addresses and supervisors, job description and reasons for leaving:

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Have you been convicted of any violations of the law other than parking violations?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, complete the following:

<i>Violation</i>	<i>Date</i>	<i>Place</i>	<i>Court</i>	<i>Disposition</i>

Have you ever been a member of another fire department? If yes, give the name(s) and address of the department(s).

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List any special training you feel would be advantageous to the fire service:

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Of all the volunteer services within the Kearney area, why do you want to volunteer your time and services to the Kearney Volunteer Fire Department?

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Do you belong to other volunteer organizations? If so, please list and briefly describe them:

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List any present or past members of the Kearney Volunteer Fire Department you know:

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For your application to be considered by the Kearney Volunteer Fire Department for membership, we require the signature of two (2) current or past members in good standing.

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*(Member signature)*

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*(Member signature)*

I understand that if I should be accepted as a member of the Kearney Volunteer Fire Department, I will uphold the constitution and by-laws of this department. I also agree to participate fully in all activities associated with the 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 Kearney Volunteer Fire Department.

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*(Signature of Applicant)*

## AUTHORIZATION FOR RELEASE OF INFORMATION

To: Kearney Volunteer Fire Department  
2211 Avenue A  
Kearney, NE 68847

Date: \_\_\_\_\_

Please accept this authorization to give the Kearney Volunteer Fire Department or their agent any and all information pertaining to any records in your files involving \_\_\_\_\_ (name of applicant), including police reports, accident reports, etc.

\_\_\_\_\_  
*(Signature of Applicant)*



City of Kearney  
Personal Information for Background Checks/Investigations

The City of Kearney conducts driving and national background checks and/or investigations on top candidates requesting employment with the City of Kearney. This includes the following areas: full, part, seasonal and contractual employment, volunteers and internships. A conviction does not automatically bar an individual from employment. Each case will be considered individually. In order to complete the process the information below is required.

\_\_\_\_\_  
Print Name (Last, First, Middle Initial)      Date of Birth      Social Security Number

\_\_\_\_\_  
Place of Birth      Sex      Race      Height      Weight      Eyes      Hair

\_\_\_\_\_  
Driver's License #      Expiration Date      Position Applying For

Have you ever been convicted, served probation or pretrial diversion for a violation of the law other than a minor traffic violation?

\_\_\_\_\_ Yes      \_\_\_\_\_ No      If yes, please provide details and specific dates (month and year).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature      Date

I certify that the above information is true and complete to the best of my knowledge. I authorize a complete background investigation based on the information I have provided.