

# **APPLICATION MUST BE NOTORIZED BEFORE BEING SUBMITTED**

## **APPLICATION FOR MEMBERSHIP**

\* Please print in ink or type.

Type of membership: Active \_\_\_\_\_ Limited \_\_\_\_\_ Associate \_\_\_\_\_

### **A) General Information**

Date of Application \_\_\_\_\_

Full Name \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

Nickname \_\_\_\_\_ Drivers License No. \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Blood Type \_\_\_\_\_

Are you at least 18 yrs of age? \_\_\_\_ Yes \_\_\_\_ No Are you a U S Citizen? \_\_\_\_ Yes \_\_\_\_ No

Highest educational level completed \_\_\_\_\_

How long have you currently lived in the Seaford Fire Territory? \_\_\_\_\_

Recommended for membership by \_\_\_\_\_

### **B) Employment Information**

Current employer and location \_\_\_\_\_

Type of work performed \_\_\_\_\_

Normal work hours \_\_\_\_\_

Have you previously been a member of this or any other fire department, rescue or ambulance squad? \_\_\_\_ Yes \_\_\_\_ No

Please list Name of any or all department (s), rescue or ambulance squad (s)

\_\_\_\_\_

Address \_\_\_\_\_

Date of service: \_\_\_\_\_

Positions held: \_\_\_\_\_

Type of fire, rescue or ambulance training received: \_\_\_\_\_

\_\_\_\_\_

Reason(s) membership was terminated: \_\_\_\_\_

Have you ever served in the active or reserve armed forces of the United States? \_\_\_\_\_

If so, specify type of discharge: \_\_\_\_\_

**C) Information Pertaining to Membership in Other Types of Organizations**

Are you presently a member of any other volunteer or fraternal organization? \_\_\_\_\_

If so, please list such organization(s): \_\_\_\_\_

\_\_\_\_\_

Please specify any offices held in other organizations: \_\_\_\_\_

\_\_\_\_\_

Please state, on average, the amount of time you devote each month to the other organizations of which you are a member: \_\_\_\_\_

**D) Medical History**

Do you presently have any physical handicaps or limitations? Yes \_\_\_\_\_ No \_\_\_\_\_

If the answer to the previous question is "yes", please describe in detail the handicaps or limitations from which you suffer: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you been treated by a physician or other professional for a physical (other than minor colds) or mental illness within the last 5 years? Yes \_\_\_\_\_ or No \_\_\_\_\_

If the answer to the previous question is "yes", please describe each physical or mental condition for which you were treated, the date(s) of such treatment and the results thereof: \_\_\_\_\_

\_\_\_\_\_

State to the best of your knowledge and belief, whether you are now in good health: \_\_\_\_\_

\_\_\_\_\_

**E) Use of Alcohol, Other Intoxicants and/or Drugs**

Are you now or have you ever been a habitual user of alcohol or other intoxicants?

Yes \_\_\_\_\_ or No \_\_\_\_\_

If you answered "yes" to the preceding question, please describe in detail your present or previous habitual use of alcohol or other intoxicants: \_\_\_\_\_

Are you now using or have you ever used opium, morphine, marijuana, cocaine, heroin, or any other drug, barbiturate or hallucinogen as a habit or dependency?

Yes \_\_\_\_\_ or No \_\_\_\_\_

If you answered “yes” to the preceding question, please describe in detail your present or former usage of such drugs, barbiturates or hallucinogens: \_\_\_\_\_

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

State whether you have ever been under the treatment for such habit or dependency, and, if so, the details thereof: \_\_\_\_\_

\_\_\_\_\_

Are you currently using any prescriptive drugs or medications? Yes \_\_\_\_\_ No \_\_\_\_\_

If your answer to the preceding question is “yes”, please specify the prescriptive drugs or medications you are using and your current dosage: \_\_\_\_\_

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

**F) Criminal Activity**

Have you ever been arrested or convicted of a criminal offense? Yes \_\_\_\_\_ No \_\_\_\_\_

If your answer to the preceding question is “yes”, please provide the particulars, including the type of offense, date of arrest or conviction, and the sentence imposed: \_\_\_\_\_

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

## **G) Consents and Affirmation**

I agree, by the execution of this application, to be governed by the constitution and by-laws of the Seaford Volunteer Fire Department, Inc. as they now exist and as they may hereafter be amended from time to time. To the extent to which is lawful, I waive myself, and for my heirs and assigns, all provisions of law prohibiting any physician or other person who has attended or examined me or who may attend or examine me from disclosing to the SVFD, or any agent thereof, any knowledge or information that he or she has acquired. I agree to submit to a physical examination, and to urinalysis testing for any of the alcohol, other intoxicants or drugs described in Paragraph E above, if so requested by the SVFD prior to my acceptance as a member and at any time thereafter while I am a member of the SVFD.

By the execution of this application, the undersigned authorizes any designee of the Board of SVFD, or any designated member of the Investigation Committee of the SVFD, or any designated agent thereof, to obtain any information relating to his or her personal history from individuals, schools, residential management agents, employers, criminal justice agencies, financial or lending institutions, credit bureaus, consumer reporting agencies, retail business establishments, medical institutions, hospitals or other repositories of medical records. This information may include, but is not limited to, the undersigned's academic, residential, achievement, performance, attendance, personal history, disciplinary, criminal history record, arrest, conviction, medical, psychiatric/psychological, and financial and credit information.

I declare that all the above statements are true and correct to the best of my knowledge and belief, and I understand that any false or misleading statements in this application will be sufficient cause for the rejection of my application or the subsequent termination of my membership. I release the SVFD, or any agent thereof, from any liability in connection with his, her, or their investigation of my background in connection with this application, and I further release any person, agency or entity from any liability with respect to the disclosure or reporting of my personal history, physical condition, criminal record, work history, or any other information sought and obtained, to the SVFD.

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Signature of Applicant

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Date

- All questions must be answered. If a particular question is inapplicable, mark N/A. If additional space is needed to fully answer any question, please attach an additional answer sheet and number of the corresponding question.



[HOME](#) > [TITLE 16](#) > [CHAPTER 66](#)

[§ 6646](#) [§ 6647](#)

# TITLE 16

## Health and Safety

### Safety

#### CHAPTER 66. FIRE PREVENTION

##### Subchapter IV. Volunteer Firefighters

§ 6646. Definitions.

"Member" means a volunteer firefighter of a Delaware volunteer fire department, as certified by the Delaware State Fire Prevention Commission.

[76 Del. Laws, c. 157, § 1.](#);

§ 6647. Membership requirements for volunteer firefighters.

(a) An applicant for membership in a Delaware volunteer fire department who has been convicted of or, had that applicant been charged as a juvenile, adjudicated delinquent of any of the following crimes is prohibited from serving as a firefighter in this State:

(1) A felony involving sexual misconduct where the victim's failure to affirmatively consent is an element of the crime, such as forcible rape;

(2) A felony involving the sexual or physical abuse of a child or of an elderly or infirm person, such as sexual misconduct with a child, sexual exploitation of a child, making or distributing child pornography, incest involving a child, or assault on an elderly or infirm person;

(3) A crime in which the victim is an out-of-hospital patient or a patient or resident of a healthcare facility, including abuse, neglect, or theft from or financial exploitation of a person entrusted to the care or protection of the applicant;

(4) Arson in the third, second, or first degree; reckless burning or exploding; cross or religious symbol burning; or any crime in which the applicant intentionally or recklessly started a fire or caused an explosion, or attempted or conspired to do so;

(5) A law of another state, territory, or jurisdiction which is the same or equivalent to the offenses described in paragraphs (a)(1) through (4) of this section.

(b) Membership in a Delaware volunteer fire department must be denied if the applicant has been convicted or, if that applicant was charged as a juvenile, has been adjudicated delinquent of any of the following crimes, except in extraordinary circumstances:

(1) Any crime for which the applicant is currently incarcerated, on work release, on probation, or on parole;

(2) Any crime in the following categories, unless at least 5 years have passed since the applicant's conviction or at least 5 years have passed since the applicant was released from custodial confinement, whichever occurs later:

a. A serious crime of violence against a person, such as assault with a dangerous weapon, aggravated assault, murder or attempted murder, manslaughter (other than involuntary manslaughter), kidnapping, or robbery of any degree;

b. A crime involving a controlled substance or designer drug, including unlawful possession or distribution of, or intent to unlawfully possess or distribute, a controlled substance in Schedules I through V of the Uniform Controlled Substances Act of Chapter 47 of this title;

c. A serious crime involving property, such as burglary, embezzlement, or insurance fraud;

d. Any crime involving sexual misconduct;

e. A crime of another state, territory, or jurisdiction which is the same or equivalent to the offenses described in paragraphs (b)(2)a. through d. of this section.

(3) In extraordinary circumstances, membership may be granted under subsection (b) of this section only if the applicant establishes by clear and convincing evidence that his or her membership will not jeopardize public health or safety.

(c) An applicant for membership in a Delaware volunteer fire department who knowingly provides false, incomplete, or inaccurate criminal history information, or who otherwise knowingly violates a provision of this subchapter, is guilty of a class G felony. In addition to a term of imprisonment of up to 2 years, the court shall impose a fine of no less than \$1,000 which may not be suspended.

(d) The State Fire Prevention Commission shall adopt regulations to implement the provisions of this subchapter. The regulations must include, as part of the application form for membership in a Delaware volunteer fire department, a dated and signed statement by the applicant swearing to or affirming the following, if the following is true. If it is not true, the applicant must explain in writing what is not true and why it is not true.

"I have never been convicted of an offense that constitutes any of the crimes set forth in 16 Del. C. § 6647 or any similar offense under any federal, state, or local law. I hereby certify that the statements contained in this

application are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement in this application, I am subject to penalties prescribed by law, including denial or revocation of membership in the volunteer fire department and a mandatory fine of at least \$1,000 or a term of imprisonment of up to 2 years, or both."

(e) An applicant for membership in a Delaware volunteer fire department who is denied membership or whose membership is revoked because of the requirements of this subchapter may appeal the denial or revocation to the State Fire Prevention Commission within 15 days of written notification of the denial or revocation by the volunteer fire department. An appeal under this subsection must be held in accordance with the appropriate provisions of the Administrative Procedures Act, Chapter 101 of Title 29, and is subject to judicial review under subchapter V of Chapter 101 of Title 29.

[76 Del. Laws, c. 157, § 1](#); 70 Del. Laws, c. 186, § 1.

**DELAWARE STATE FIRE PREVENTION COMMISSION**  
**DELAWARE VOLUNTEER FIREMEN'S CRIMINAL HISTORY AFFIDAVIT**

This affidavit **must** be completed by all applicants for membership in a Delaware volunteer fire department and attached to the application for membership. Applicants must complete one of the two statements below. An application is not considered complete and shall not be processed until the notarized affidavit is attached.

**AFFIDAVIT**

I have never been convicted of an offense that constitutes any of the crimes set forth in **16 Del. C. §6647** (*attached hereto*) or any similar offense under any federal, State, or local law. I hereby certify that the statements contained in this application are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement in this application, I am subject to penalties prescribed by law, including denial or revocation of membership in the volunteer fire department and a mandatory fine of at least \$1000 or a term of imprisonment of up to 2 years, or both.

\_\_\_\_\_  
Applicant's Signature Date

I am unable to submit the above statement. My written explanation as to what is not true with regard to the above statement and why is set forth below:

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

*[Attach additional pages if needed along with a certified copy of your criminal history record from the appropriate authorities]*

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_ (County)

\_\_\_\_\_ (State)

Before me personally appeared, \_\_\_\_\_, Applicant, of lawful age, to me known to be the identical person who signed this document of application and being by me first duly sworn, on oath state that all the foregoing statements are true and correct to the best of \_\_\_\_\_ knowledge and belief.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Printed or Typed Notary Public's Name

My Commission expires: \_\_\_\_\_

(Seal)