


**NTFD Application**

Revised 05/03/2025

## Membership Application

**Personal Information**

The NTFD does not discriminate in electing members on the basis of Race, Color, Sex, Religion, Creed, National Origin, Ancestry, or Political Affiliation, except when Age or Physical requirements constitute a Bonafide occupational qualification necessary for proper and efficient administration or as provided by law. No question on this application is intended to secure information to be used for such discrimination.

This application must be filled out by the applicant only. Print in ink or type neatly, accurately, and thoroughly. Attach supplement if necessary. All information will be given every consideration, but its receipt does not imply that the applicant will become a member.

Do Not falsify or omit material since information made herein is subject to verification to determine the applicants' qualifications for membership.

To All Applicants:

1. The applicant must be a legal resident of Wabash County and reside in Noble Township or within a 4-mile radius extending from the Township Line.
2. The applicant must have a Highschool Diploma or equivalent.
3. The applicant must be 18 years of age unless applying for the NTFD Student-Firefighter Program.
4. The applicant must have a valid Indiana Driver's License and proof of Insurance.
5. The applicant must never have been convicted of a Felony.
6. If there is a change of address after the application has been submitted, you must notify the Chief.

**Environmental Factors for Firefighters**

The essential job functions for a firefighter are performed in and affected by but not limited to the following environmental factors.

A Firefighter Must:

- Operate both as a member of a team and independently at incidents of uncertain durations.
- Spend extensive time outside exposed to various types of elements.
- Experience frequent transition from hot to cold and from humid to dry atmospheres.
- Tolerate extreme fluctuations in temperatures and preform physically demanding work in hot (up to 400 F), humid (up too 100 %) atmospheres while wearing equipment that can significantly impair body-cooling.

- Work in wet, icy, or muddy areas.
- Preform a variety of tasks on slick and hazardous surfaces (such as rooftops or from ladders).
- Work in areas where sustaining traumatic or thermal injuries is possible.
- Face exposure to carcinogenic dusts such as asbestos, toxic substances such as hydrogen cyanide, acids, carbon monoxide, or organic solvents either through inhalation or skin contact.
- Face exposures to infectious agents such as Hepatitis B or HIV, NTFD does offer vaccine shots for Hepatitis B virus.
- Preform complex tasks during life-threatening emergencies.
- Work for long periods of time, requiring sustained physical activity and intense concentration.
- Face life or death decisions during emergency conditions.
- Tolerate exposures to grotesque sights and smells associated with major trauma and burn victims.
- Make rapid transitions from rest to near maximal exertion without warm-up periods.
- Operate in environments of high noise, poor visibility, and limited mobility at heights and enclosed or confined spaces.
- Use manual or power tools in the performance of duties.
- Rely on senses of sight, hearing, smell, and make critical decisions in confused, chaotic, and potentially life-threatening environments.
- Wear personal protective equipment that weighs in excess of 50 pounds while preforming the essential functions of the job.
- Preform physically demanding work while wearing positive pressure breathing equipment.

**Indiana State Training Requirements:**

- All new members must obtain the “mandatory” required training to be on an emergency scene.
- All members will be given the opportunity for furthering their education through trainings by multiple medias but will require the members to dedicate a lot of personal time and hard work.
- NTFD currently requires members wishing to join the Fire Department Roster to obtain FF I/II along with meeting additional prerequisites during their probationary period on the Auxiliary Roster (subject to NTFD By-Laws).
- Members must follow any training requirements set forth by the Indiana State Fire Marshalls Office or Indiana Department of Homeland Security.

## Personal Information

Do Not falsify or omit material, since information made herein is subject to verification to determine the applicants' qualifications for membership.

## Please Print

Name; Last: _____ First: _____ Middle: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ ( Home , Mobile [Android or IOS] , Other )

Date of Birth: _____ /_____ /_____ Social Security Number: _____

Drivers License Number: _____ Insurance Company: _____

Place of Employment: _____ Shift: _____

| | | |
|---|---|---|
| Are you a citizen of the United States of America? | YES | NO |
| Do you have a high school diploma or equivalent? | YES | NO |
| Have you ever been convicted of a crime? | YES | NO |

If yes, please explain: _____

_____

Incase of emergency, please notify:

Name: _____ Relationship: _____

Address: _____ Phone: _____

Name: _____ Relationship: _____

Address: _____ Phone: _____

Please read each of the following paragraphs carefully. Indicate your understanding of, and consent to, the contents and conditions of each paragraph by initializing at the end of each paragraph as indicated. If you have any questions, comments, or concerns, please contact the fire Chief before initializing.

1. I understand and except that, if I join NTFD, I will be joining conditionally based upon the need of passing any medical examinations that NTFD may be deem necessary to determine my ability to preform the essential functions of the position. I understand and accept that this may include; Drug, Alcohol, or Substance abuse testing.

   Initials: _____

2. I hereby attest, to do my very best to be fun and have fun in the Brotherhood/Sisterhood of the Fire Service! I also understand I must tell the NTFD Officers interviewing me a funny joke (then possibly the entire membership).

   Initials: _____

3. I understand and accept that if any information required in this application has been falsified or intentionally omitted, my application my be void and further disqualified from ever applying for membership with NTFD. I further understand and accept that, if I join NTFD, I may be subject to discipline action including but not limited to Suspension, or Termination if any information required by this application has been falsified or intentionally omitted.

   Initials: _____

**References**

Please list 3 references - that are not related to you:

1. Name: _____ Phone: _____
2. Name: _____ Phone: _____
3. Name: _____ Phone: _____

Do you have any commitments (e.g. second job, school, etc.) which may interfere with or adversely affect your membership should we select you? YES NO
If yes, please explain: _____
_____
_____

**Applicants Certification Agreement**

I authorize the investigation of all statements contained on this application and release from liabilities any persons supplying such information, and release NTFD from any and all liability that may result from making background investigations.

I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation, or omission on this application will be cause for denial of membership or immediate termination of membership, regardless of when or how discovered.

I understand that any membership relationship is at will, meaning that either party can end this relationship at any time, and for any reason, or no reason.

I have read and reviewed the information contained in these pages of this application. By signing this application, I certify that I understand all of the information requested and that I have provided information that is truthful, complete, and accurate.

Signature: _____ Date: _____

**Personal History Investigation Authorization Release**

Whereas, a personal history investigation must be conducted to determine character traits and habits, indicative of moral character, and;

Whereas, only applicants of good moral character may be eligible for membership and affiliation with the **Noble Township Fire Department.**

I, _____, Therefore, give full authorization to the Chief of **Noble Township Fire Department,** or officer, or agent appointed by the Chief, to conduct a personal history investigation through; Local, State, and Federal law enforcement agencies.

I herby acknowledge and understand that my signature on this form gives full permission and authorization to conduct a personal history investigation.

Signature: _____ Date: _____

*This page is for NTFD member/officer to fill out*

Applicant Name: _____

NTFD member handing out application: _____ Date: _____

NTFD member receiving application: _____ Date: _____

Background check; Pass_____ Fail_____ Date: _____

NTFD Officer's Vote: Recommend_____ Do not recommend_____ Date: _____

NTFD all vote: Yes_____ No_____ Date: _____

Member stepped off: Re-hirable_____ Not re-hirable_____ Date: _____

Officers Name: _____

Comments:_____

_____

_____

_____

_____

_____

# NOBLE TOWNSHIP FIRE DEPT.

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