



**Membership Application for the
Township of Spring Fire Rescue Services**

And

Volunteer Relief Association

- Complete and return all pages of the application
- Complete Pennsylvania Child Abuse History Clearance application online at: <https://www.compass.state.pa.us/CWIS> and submit a certificate with application
- Complete and return Driver License Records Check at: <https://epatch.pa.gov/home>
- If you have any questions, please do not hesitate to contact Jonathan Fritz, Deputy Fire Chief. Phone: 610-898-1452 Ext. 2,
- Email: jfritz@springtwpberks.org

**VOLUNTEER REQUEST FOR WAIVER OF
FBI – FEDERAL CRIMINAL HISTORY FINGERPRINT RECORD CHECK**
(If you qualify for this waiver, this form must be completed and turned into the Administration Building
when submitting the other two PA clearances.)

I declare under penalty of perjury that the following is true and correct:

1. I have been a resident of the Commonwealth of Pennsylvania during **the entirety of the previous ten-year period** from the date of this document;
2. I have **NEVER** been named the perpetrator of a founded report of child abuse;
3. I have **NEVER** been convicted of one or more of the following types of offenses, including the attempt, solicitation or conspiracy to commit any of the following offenses:
 - a. Criminal homicide
 - b. Aggravated assault
 - c. Stalking
 - d. Kidnapping
 - e. Unlawful Restraint
 - f. Rape
 - g. Statutory sexual assault
 - h. Sexual assault
 - i. Involuntary deviate sexual intercourse
 - k. Indecent assault
 - l. Indecent exposure
 - m. Incest
 - n. Concealing the death of a child
 - o. Endangering the welfare of a child
 - p. Dealing in infant children
 - q. Prostitution and related offenses
 - r. Crimes related to obscene and other sexual materials and performances
 - s. Corruption of minors
 - t. Sexual abuse of children
4. Within a 5-year period immediately preceding the date of this document, I have not been convicted of a felony offense under The Controlled Substance, Drug, Device and Cosmetic Act; AND
5. I have not been convicted of an offense similar in nature to those crimes listed under paragraphs 2, 3, or 4 above under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former Pennsylvania law.

I understand that statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 relating to unsworn falsification to authorities.

Signature

Date

Print Name

Township of Spring

2850 Windmill Road
Reading, PA 19609
www.springtwpberks.org
610.678.5393

VOLUNTEER APPLICATION

The Township of Spring does not discriminate against persons seeking to volunteer with the Township on the basis of race, color, religion, sex, age, national origin, veteran status, sexual orientation, gender identity, disability or any other basis of discrimination prohibited by law. No question on this volunteer application is intended to secure information to be used for such discrimination.

Volunteer Interest / Preference			
Work Preference:		Date of Birth:	
For Which Department Would You Like to Volunteer?			
Specific Volunteer Activity Interests (i.e. Firefighting, Medical, Administrative Tasks, Fire Prevention, Fire Police)			
Indicate the days of the week/weekend and amount of hours you are typically available:			Date available to start:
General Information			
FULL NAME:			SOCIAL SECURITY #
ADDRESS			TELEPHONE (Home)
CITY	STATE	ZIP CODE	TELEPHONE (Cell)
E-MAIL ADDRESS:			
*Have you ever been employed with or volunteered with the Township of Spring before?			<input type="checkbox"/> Yes <input type="checkbox"/> No
*If yes, please give dates: From: ___/___/___ To: ___/___/___			In what capacity?
Have you ever been terminated from a position/removed from a volunteer position for poor performance or misconduct? If yes, please explain:			<input type="checkbox"/> Yes* <input type="checkbox"/> No
<i>Please be advised that depending upon what departments/activities for which you volunteer, you will be subject to a background check which could include criminal history check, DMV record check, personal/professional references and/or child abuse clearance. Convictions are not an automatic disqualification to being approved as a volunteer and all interested individual are encouraged to express their interest in volunteering with the Township of Spring. The specific offense/criminal record/DMV history is evaluated on an individual basis which considers, at minimum, the essential functions and nature of the volunteer service area/activity and the seriousness/classification, circumstances, and age of the offense(s).</i>			

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Educational Background				
Name of School	City & State	Major course of study	Circle last year completed	Degree or Diploma
High School or Prep School			9 10 11 12	
College or Technical School			1 2 3 4	
College (Advanced Degree)			1 2 3 4	
List particular skills which you feel especially qualify you for the position you seek with this organization. Include, if applicable, specialized certifications or licenses , computer knowledge and experience level, language fluency, equipment operation, skilled trade knowledge, etc.):				
<i>To be completed by applicant for office/clerical work</i>			<i>To be completed by applicant for garage/maintenance work</i>	
Typing	Yes No	Words per minute:	Type of vehicles and equipment operated	Years of experience
Dictation	Yes No	Words per minute:		
Computer Skills				
Hardware Used:				
Software Used:				
Computer Skill Level (circle)	BASIC	MODERATE	ADVANCED	
Employment/Volunteer History List each position held. Start with your present or last job or volunteer experience.				
Company Name				
Address - Street		City	State	Zip Code
Employed From (Mo./Yr.)	Position Title		Supervisor Name, Title (plus contact information)	
Employed To (Mo./Yr.)	Description of duties, responsibilities and/or significant accomplishments			
Salary - Starting			Salary - Ending	
Hours Worked Weekly	Reason For Leaving			

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Company Name			
Address - Street		City	State
Employed From (Mo./Yr.)	Position Title	Supervisor Name, Title (plus contact information)	
Employed To (Mo.-Yr.)	Description of duties, responsibilities, and/or significant accomplishments		
Salary - Starting		Salary - Ending	
Hours Worked Weekly	Reason For Leaving		
Company Name			
Address - Street		City	State
Employed From (Mo./Yr.)	Position Title	Supervisor Name, Title (plus contact information)	
Employed To (Mo.-Yr.)	Description of duties, responsibilities, and/or significant accomplishments		
Salary - Starting		Salary - Ending	
Hours Worked Weekly	Reason For Leaving		

For volunteer assignments, a minimum of 2 positive references from individuals other than friends or family members must be obtained. If your work history above is insufficient to provide 2 reference contacts, or in the event we are unable to successfully obtain a reference from your work history, please provide additional references below (i.e. former or current teachers, professors, directors from organizations for which you have volunteered, clergy, etc.)

Name of Reference	Position/Title & Where Employed	Relationship to You (i.e. former teacher, etc.)	Phone / Email

Please indicate any current certifications (i.e. CPR, First Aid, Emergency Vehicle, EMT, etc.) and/or background clearances you have that relate to the position for which you are applying:

Clearance/Certification	Date Obtained	Expiration Date (if any)	Other (Please List)	Date Obtained	Expiration Date (if any)
Child Abuse Clearance			Driver License (Provide Copy)		
FBI Background Check					
Criminal History (PA State)					

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I certify that the information contained on this volunteer application is correct to the best of my knowledge and understand that falsification of this information is grounds for dismissal from volunteer service with the Township of Spring.

I authorize the employers/supervisors listed above to give the Township of Spring any and all information concerning my previous employment/volunteer activities and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing said information to the Township of Spring.

The Township of Spring is hereby authorized to investigate my past employment/volunteer service, professional and other licensure and/or certifications, criminal record, child abuse record, driving record and military record through its Human Resource Department or its designee. For the purpose of verifying my qualifications/suitability for volunteer service, the Township of Spring is authorized to obtain educational records and information relating to courses taken, my performance in those courses, degrees and awards received by me as well as disciplinary actions taken against me while enrolled. In the event an investigation reveals convictions or other issues directly related to the volunteer department/activity, I understand my application for volunteering, or consideration to be a volunteer, could be terminated immediately.

I understand that passing a drug test, and in some cases a medical examination/physical, is a condition for certain volunteer departments/activities. If such testing/exam is required, it will be conducted after conditional approval to become a volunteer.

If volunteering for the Township of Spring, I agree to conform to its policies and procedures, including the Township Code of Conduct and any departmental-specific rules, regulations, and Standard Operating Procedures. I acknowledge that any failure to do so may result in being removed as a volunteer.

I further understand that I may be subject to re-verification of my Child Abuse, Criminal background and DMV records periodically during the course of my volunteer service as determined to be necessary by the Department Head based on the position for which I am volunteering.

NOTE: For certain volunteer positions, the volunteer will be required to provide his/her own proof of Child Abuse and/or criminal background and/or DMV record report within 30 days of conditional approval as a volunteer. The Department Director and/or HR Department will have sole authority to determine whether records provided by the volunteer candidate are satisfactory. Failure to do so, if instructed, will result in dismissal as a volunteer.

Volunteer Applicant's Signature

Date

If under the age of 18 Parent/Guardian Signature

Date