

CEDAR HILL FIRE PROTECTION DISTRICT

6766 CEDAR HILL RD
CEDAR HILL, MO 63016
636-285-3345

NEW MEMBERSHIP PROCEDURES

An application for membership for volunteer may be acquired from the duty officer or administrative offices at Cedar Hill Engine House No.1. The completed application may be returned to same and will be submitted to the Review Committee. The applicant (if 18 or older) is required to provide a record check from the Missouri State Highway Patrol (form provided). A drug screen test will also be required, scheduled and paid for by the district for all applicants over the age of 18 years before final approval of application. The Review Committee shall at least, semi annually no later than May 15th and November 15th, conduct an interview with the applicant and also outline their responsibilities and obligations to the Fire District. Junior Firefighters (age 14 -17) must have parent or guardian consent and must have one present during the interview process. The application is then submitted, along with interview comments and results, to the Chief and Board of Directors for review, approval, or rejection.

Upon approval by the Board of Directors the applicant will become a probationary recruit. A letter of approval will be sent to the applicant by the Secretary of the Board of Directors. Also, if the applicant is placed on a "waiting list" for an opening on the roster, they will be notified of such. The new member is then introduced to the membership at the appropriate organizations next regular meeting. Minimum attendance requirements are required to remain a member of the fire department and will be strictly enforced.

The probationary recruit will be contacted by the Department to set up further meetings and recruit training. Evaluations will be preformed before completion of the recruit phase and before completion of the probationary period.

After the probationary period has been served, and approval by the Fire Chief, a brief ceremony will be conducted where they will be presented their badge, insignias, and permanent I.D. card at a Firefighter's Organization business meeting.

Terry C. Soer,
Chief

PLACE OF BIRTH: _____

NAMES, ADDRESS, AND PHONE NUMBER OF THREE (3) REFERENCES NOT RELATED TO YOU: **REFERENCES MUST BE 21 YEARS OF AGE OR OLDER:**

_____ PH # _____

_____ PH # _____

_____ PH # _____

HOW MUCH EDUCATION COMPLETED? CIRCLE ONE:

GRADE SCHOOL: 1 2 3 4 5 6 7 8 HIGH SCHOOL: 1 2 3 4

COLLEGE: 1 2 3 4

ANY FIREFIGHTING EXPERIENCE? _____

ADDRESS LAST FIVE YEARS: _____

REASON FOR WANTING TO JOIN FIRE DEPT.

ANY OTHER INFORMATION YOU FEEL SHOULD BE CONSIDERED:

I CERTIFY THAT THE ABOVE INFORMATION IS ACCURATE. I UNDERSTAND THAT ANY FALSE STATEMENT MAY BE GROUNDS FOR DISQUALIFICATION FOR MEMBERSHIP, EVEN AFTER ACCEPTANCE.

DATE: _____ SIGNATURE: _____

IF A JUNIOR, PARENT OR GUARDIAN'S PERMISSION: _____

(signature)

DO NOT WRITE BELOW THIS LINE

APPROVED: _____ REJECTED: _____
REASON FOR REJECTION: _____ CHIEF: _____
BOARD OF DIRECTOR: _____ DATE: _____

EMERGENCY INFORMATION SHEET

NAME: _____

ADDRESS: _____

PHONE: _____ ADDITIONAL CONTACT PHONE: _____

NAME TWO (2) PEOPLE TO CONTACT IN CASE OF EMERGENCY:

NAME: _____ PH # _____

NAME: _____ PH # _____

BLOOD TYPE: _____ MEDICATION BEING TAKEN: _____

DOCTORS NAME: _____

HOSPITAL TO BE TRANSPORTED TO: _____

ANY ADDITIONAL MEDICAL INFORMATION YOU FEEL SHOULD BE KNOWN

IN CASE OF EMERGENCY: _____

DATE: _____

APPLICANT RELEASE

In connection with my application for volunteer, I understand that Cedar Hill Fire Protection District will perform background and reference checks to obtain any and all information regarding my character, work habits, performance and experience, along with reasons for termination of past employment. Further, I understand that Cedar Hill Fire Protection District will be requesting information concerning my driving record and/or information from various federal, state and local agencies which maintain records concerning criminal offenses.

I hereby authorize without reservation, any party or agency contacted by Cedar Hill Fire Protection District to furnish all pertinent information regarding me, whether the information is of professional or personal nature. Additionally, I fully release and completely hold harmless any such party or agency and Cedar Hill Fire Protection District from any liability or damages whatsoever relating to the disclosure or receipt of such information.

I understand that this means that I will not sue any party or agency for disclosing any requested information to Cedar Hill Fire Protection District, nor will I sue Cedar Hill Fire Protection District for requesting or receiving such information.

Printed Applicant Name

Signature of Applicant

Date

ACKNOWLEDGEMENT AND CONSENT

I understand that in connection with my application for Junior Volunteer Firefighter, I am being required to submit to a lab test that screens for drug use. I authorize the release of the results of the lab test to Cedar Hill Fire Protection District. I consent to the test and I understand that the results of the test may preclude my acceptance by Cedar Hill Fire Protection District into the Junior Volunteer Firefighter program.

Applicant

Date

Parent or Guardian of Applicant

Date



REQUEST FOR CRIMINAL RECORD CHECK

PLEASE PRINT OR TYPE.

GENERAL INFORMATION

NAME LAST FIRST MIDDLE JR / SR
MAIDEN / ALIAS LAST FIRST MIDDLE JR / SR
SEX [] MALE [] FEMALE DATE OF BIRTH (MM/DD/YYYY) SOCIAL SECURITY NUMBER RACE [] BLACK [] INDIAN [] OTHER [] WHITE [] ASIAN
ADDRESS STREET - P.O. BOX CITY STATE ZIP CODE
ENTITY TYPE [] STATE [] FEDERAL PURPOSE FOR REQUEST [] EMPLOYMENT [] LICENSING [] VOLUNTEER [] OTHER (specify)

TYPE OF RECORD CHECK - PROCESSING FEE - METHOD OF PAYMENT

(per Sections 43.527 and 43.530, RSMo.)

- [] \$10.00 NAME SEARCH Based on NAME, DATE OF BIRTH, AND SOCIAL SECURITY NUMBER. Response will be returned with all open records and records of conviction.
[] \$20.00 FINGERPRINT SEARCH Based on APPLICANT FINGERPRINT CARD. Response will be returned with complete records to the individual or qualifying entity.

Fee is payable either by check or money order (NO CASH) to "State of Missouri, Criminal Record System Fund."

MSHP / CENTRAL REPOSITORY RESPONSE



FORWARD TO - SEND REPLY TO

Please forward the request and fee to: Missouri State Highway Patrol Criminal Justice Information Services Division Post Office Box 9500 Jefferson City, MO 65102

SEND REPLY TO (Print or type your mailing label below.)

Telephone (include area code) _____

Three empty rectangular boxes for mailing label information.

Criminal Justice Information Services Division General Information

The Missouri Criminal Records Repository (MCRR), collects, maintains, and disseminates Criminal History Record Information (CHRI) as defined by 43.500 and 589.400 RSMo.

Criminal History Record Information is information collected by criminal justice agencies on individuals consisting of arrests, prosecution, a final disposition, correctional supervision, and release. All felony and serious misdemeanor arrests (referred to as reportable arrests) including offender registration information as defined under 589.400, RSMo, and all alcohol and drug related traffic offenses are reportable to the MCRR.

Criminal history records are designated as open or closed.

- Open records
 1. arrest record for 30 days following arrest.
 2. arrest record for which charges have been filed.
 3. court disposition of guilty.
 4. suspended imposition of sentence during probation period.
- Closed records
 1. arrest record after 30 days following arrest.
 2. nolle prossed.
 3. dismissed.
 4. found not guilty.
 5. suspended imposition of sentence after probation completed.
- Closed records are accessible to certain groups designated in section 610.120, RSMo.
 - MCRR will only release closed records to those noncriminal justice entities entitled to closed records, when the criminal record check is based on a fingerprint search which will assure the identity of the subject in question.
 - Any person can receive their own record, open and closed, by submission of fingerprints and required fee.

Any requester may receive open record information.

Closed records are accessible by the following, in accordance with 610.120 RSMo, with the submission of fingerprints and required fee.

FBI Record requests

- The FBI files are open to criminal justice agencies for the administration of criminal justice.
- The FBI has only open files in that if someone has the authority to receive the records, they receive all that is on file.
- The FBI allows access to their files to noncriminal justice agencies for certain purposes for a fee.
 - The purpose for the record check must be set forth in the federal regulations.
 - The state, from which the noncriminal justice request originates, must have a state statute specifying the entity has state authority to check the FBI files for the purpose specified.
 - Fingerprints must be submitted before the FBI will release their files to a noncriminal justice entity.
 - The result of the federal record search must terminate at a governmental agency and is not to be released to a private entity.
- All requests into the federal file from the state entities must come through and be stamped by MCRR.
- Effective 10-01-2007, Federal record checks for noncriminal justice entities are \$19.25 for licensing or employment checks and \$15.25 for volunteers to those covered care facilities.

PENALTY - A person who knowingly violates any provision of section 43.532, 43.540, 610.100, 610.105, 610.106, or 610.120 is guilty of a class A misdemeanor.