

**MANLIUS FIRE DEPARTMENT**  
**BUNK-IN MEMBERSHIP APPLICATION**

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**PART 1 – Personal Information**

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

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

Address: \_\_\_\_\_

Apartment Complex Name: \_\_\_\_\_ Apt: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

NYS Driver's License No. (Required): \_\_\_\_\_ Class: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Member of a Fire and/or EMS Agency? Yes / No (Circle One)

If Yes, Name of Agency: \_\_\_\_\_

If Yes, Location of Agency: \_\_\_\_\_

**PART 2 – Emergency Contact**

Next of Kin (Name): \_\_\_\_\_ Relationship: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Contact Name in the event of an emergency (If different from above): \_\_\_\_\_

Relationship: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Should we notify this person in the event of a minor injury? Yes / No (Circle One)

## **PART 3 – Criminal Record**

Have you ever been convicted of a crime (Misdemeanor or Felony) other than a parking violation?

Yes / No (Circle One)

Traffic Violations? Yes / No (Circle One)

If yes, list date and type of conviction (attach additional sheets if necessary):

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## **PART 4 – Employment and Service Record**

Current Employer:

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Weekly Hours of Employment: \_\_\_\_\_

Address: \_\_\_\_\_

How long have you been employed at this Company? \_\_\_\_\_

Employer Phone No. \_\_\_\_\_

Have you ever served in the armed forces? Yes / No (Circle One)

Branch: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_ Rank at Discharge: \_\_\_\_\_

## **Part 5 – Personal References**

Please list 2 personal references that are not employer or fire department related. Include name, address, phone, email and relationship.

1. \_\_\_\_\_

2. \_\_\_\_\_

## **PART 6 – Emergency Services Experience**

List below all previous experience related to emergency services, including your present Fire/EMS Agency. Include name and address of any prior organization, length of service, and reason for leaving. (Attach additional sheets if necessary)

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_

**Please include 2 Letters of Reference, ideally from past departments/organizations.**

Include the name, address, phone, email, & title/position of the author of the Letters below.

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_

## **PART 7 - Education**

It is the requirement of the Manlius Fire Department Bunk-in Program that applicants must provide documentation of successful completion of high school (diploma) or G.E.D. certificate or diploma from an accredited college or university, completion of New York State Firefighter I and/or NYS EMT-Basic and fulltime enrollment in a College or University Program within Onondaga County or contiguous counties before consideration into the Program.

Are you still in High School? Yes / Non (Circle One)

If yes, please list anticipated graduation date: \_\_\_\_\_

High School: \_\_\_\_\_

Address: \_\_\_\_\_

College/University Program Attending: \_\_\_\_\_

College/University Address: \_\_\_\_\_

Field of Study: \_\_\_\_\_

## **PART 8 – Emergency Services Training**

List below any additional fire schools/classes, medical courses, and certifications which you have successfully completed and are currently certified in. Please be as specific as possible and include where the course was taken, the approximate dates, and state registry number if applicable. Provide a copy of all Certifications including NYS Firefighter I and EMT with Application.

E.M.S. Courses, if any: EMT Level \_\_\_\_\_ Card No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

CPR Level: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Others: \_\_\_\_\_

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

Note: Please attach copies of applicable certificates.

Fire Courses, if any: \_\_\_\_\_

Others: \_\_\_\_\_

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

Note: Please attach copies of applicable certificates.

## **PART 9 – Qualification Requirements**

1. Applicant shall be a minimum of 18 years of age prior to the beginning of the academic program.
2. Applicant shall have High School Diploma or G.E.D. by June 30<sup>th</sup>.
3. Applicant shall go through application and interview process.
4. Applicant shall be, or have been accepted in and plan to be a full-time, matriculated student in the Upstate Medical University Paramedic Program, OCC Fire Protection Technology Program or other Fire/Medical program in an accredited college or university in Onondaga County or contiguous county.
5. Applicants entering into a Fire-related program shall be an active member of a recognized volunteer fire department in New York State and outside of Onondaga County, New York.
6. Applicant shall possess either an EMT-B card and/or Interior Firefighter status in their own department.
7. Applicants who are Interior Firefighters shall provide a letter from their sponsoring Fire Department Chief that the Applicant is cleared to interior status and successfully completed NYS Firefighter 1 or its equivalent.
8. Applicants who are Interior Firefighters shall provide a Certificate of Insurance from their sponsoring Fire Department for Workers Compensation coverage; provide with application.
9. Applicant will be required to enter into a written contract with the Manlius Fire Department and provide a refundable \$250 room deposit before Move-In, if accepted into the Program.
10. Applicants shall provide proof of a physical or be scheduled to have one before Move-In, If accepted into the Program.
11. Applicant shall maintain or exceed the academic averages required by the college or university to maintain full-time enrollment.

## **PART 10 - Agreement**

Please read, sign, and date the below agreement before mailing this application. All applications and additional information requested must be mailed to:

Manlius Fire Department

8200 Cazenovia Road

Manlius, NY 13214

ATTN: Bunk-In Program

Any application that is not mailed to the above address shall not be the responsibility of the fire department. Please read and sign this agreement before submitting your application.

As part of our investigation procedure, a routine inquiry may be made which will provide applicable information concerning character, general reputation, drivers' history, and personal characteristics. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.

I understand that any false answer, statement, or implication of the omission of any pertinent or required information made by the applicant on this application or other required documents shall be considered sufficient cause for denial of acceptance to the Bunk-In Program. I also understand that all equipment issued to me shall remain property of the Manlius Fire Department and must be surrendered upon completion/termination of the Bunk-In Program membership.

This certifies that this application was completed by me, and that all entries on it and information in it are complete to the best of my knowledge.

Signed: \_\_\_\_\_

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

The Manlius Fire Department does not discriminate because of age, race, creed, color, religion, national origin, sex, or disability. Your opportunity for membership in the Bunk-In Program with Manlius Fire Department depends solely on your qualifications.