



South Bay Volunteer Fire Department

8817 Cicero Center Road

Cicero New, York 13039

315-699-2893

Southbayfire.org

Welcome to the South Bay Volunteer Fire Department (SBFD). We are pleased that you have expressed an interest in joining our organization and hope that you will find it a rewarding experience.

The SBFD is made up of community members who have pledged to provide emergency service protection to the area. The area served by this department consists of South Bay and surrounding areas in Cicero. The department responds to over 400 emergencies each year.

As members of the SBFD we respond 24 hours a day to both fire and medical emergencies. Additionally, we are involved in training, special details, fire prevention, and some social functions sponsored by the Fireman's Association.

Eligible applicants must:

- Be at least 18 years of age
- Have a high school diploma (or GED)
- Complete a membership application
- Reside in or work (40 hours) in the district
- Gain the approval of the Fire Department and Board of Directors
- Respond to 10% of emergency alarms per 12 month period December 1st to November 30th
- Attend 50% training sessions per year
- Complete the NYS Firefighting Essentials Course within one year of joining (there is no cost to you for training)
- Attend 50% monthly meetings per year
- Successfully complete the one-year probationary period.

Member benefits

There are many benefits to joining the SBFD and helping the community. Some of the benefits of membership include:

- Pride that comes with being part of a team that protects both life and property in and around Town of Cicero
- The opportunity to be trained in many skills that are useful to your family and friends
- Service Award Program (a retirement program)
- Continuing education at Onondaga Community College
- A life insurance policy

Next Step:

If you believe you have the time and interest to become a firefighter in the South Bay Volunteer Fire Department, please

1. Complete the application. Most computers will allow you to enter text from computer if your computer has Adobe Reader or a similar product for PDF files. Save to your computer after completing.

2. Either mail it to the address above or email it to info@southbayfire.org. If you have questions, please contact us at (315) 699-2893



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Application for Membership

All applications are subject to a background check

General Information

Name: _____ Date of application: _____

Address: _____ City: _____ Zip code: _____

Home phone: _____ Work phone: _____

Social security number: _____

Height: _____

Weight: _____

Hair color: _____

Eye color: _____

Age: _____

Sex: ☐ Female ☐ Male

Do you wear eyeglasses? ☐ Yes ☐ No Do you wear contacts? ☐ Yes ☐ No

Do you have a driver's license? ☐ Yes ☐ No

If yes, what is the class? _____ ID: _____

Please list any violations: _____

Town of Cicero resident since: _____ New York State resident since: _____

Are you a citizen of the United States? ☐ Yes ☐ No

If not, do you have the legal right to remain permanently in the United States? ☐ Yes ☐ No

Have you ever been known by another name (e.g. marriage)? ☐ Yes ☐ No

If yes, please list your previous names: _____

Please indicate your availability to participate in normally required fire department activities (meetings, drills, and emergency calls). Check the appropriate time periods:

Weekdays: ☐ Days ☐ Evenings ☐ Nights

Weekends: ☐ Days ☐ Evenings ☐ Nights

Have you ever been a member of the United States Armed Forces? ☐ Yes ☐ No

If yes, did you receive an honorable discharge? ☐ Yes ☐ No

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Have you received disability or compensation benefits for any injury? ☐ Yes ☐ N

If yes, please provide dates and details:

Do you have restrictions that may affect your ability to participate in fire department activities? ☐ Yes ☐ No

If yes, please explain:

Please tell us why you would like to become a member of the South Bay Volunteer Fire Department:

Emergency Contact

In case of emergency, notify:

Name: _____ Relationship: _____

Phone: _____

Physician: _____ Physician phone: _____

Hospital preference, if any: _____

Blood type: _____

Employment

Are you employed? ☐ Yes ☐ No

May we contact your employer(s)? ☐ Yes ☐ No

Current employer: _____

Address: _____

Occupation: _____

Hours of employment: _____

Supervisor: _____

Telephone: _____

Prior employer: _____

Address: _____

Supervisor: _____

Telephone: _____

Education

Highest level of education received:

☐ High School ☐ GED ☐ Assoc Deg ☐ 4-yr Deg ☐ Post-grad ☐ Other -What? _____

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Name of last school/college attended: _____

List other special training, skills, or experience: _____

References

Please list three non-family references who have known you for at least 3 years:

Name: _____ Telephone: _____

Name: _____ Telephone: _____

Name: _____ Telephone: _____

Please list any current or past members of the South Bay Volunteer Fire Department that you are acquainted with: _____

These questions are OPTIONAL, useful if applicant has prior firefighting or EMS experience

Firematic Education/Experience (not required – all training is provided)

Department: _____ Chief: _____

Address: _____ Telephone: _____

Letter of recommendation? ☐ Yes ☐ No

Member in good standing? ☐ Yes ☐ No

Dates of membership: _____ to _____

List additional fire department memberships: _____

Positions held: _____

Schools (list course, completion date, certificate #, and location):

EMS Education/Experience (not required – all training is provided)

Organization: _____ Director: _____

Address: _____ Telephone: _____

Letter of recommendation? ☐ Yes ☐ No

Member in good standing? ☐ Yes ☐ No

Dates of membership: _____ to _____

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List additional memberships: _____

Positions held: _____

Schools (list course, completion date, certificate #, and location):

Skills/Experience

The South Bay Volunteer Fire Department often uses its own personnel to complete jobs in and around the firehouse. Therefore, the skills and/or experience of its members are a great asset. Please review the following areas and check all that are applicable to you.

- ☐ Administrative
- ☐ Air conditioning repair
- ☐ Appliance repair
- ☐ Arts
- ☐ Carpentry
- ☐ Clerical
- ☐ Computer
- ☐ Crafts
- ☐ Electrical
- ☐ Flooring
- ☐ Locksmith
- ☐ Masonry
- ☐ Mechanic
- ☐ Photography
- ☐ Plumbing
- ☐ Public speaking
- ☐ Roofing
- ☐ Sheet rock
- ☐ Small engine repair
- ☐ Teaching
- ☐ Welding
- ☐ Other:

All information contained/or obtained herein will remain confidential

State of New York
County of Onondaga
Town of Cicero

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Please check the boxes to consent to the following statements:

- ☐ I do solemnly swear and affirm that I am the above named person.
- ☐ I personally read and wrote or typed answers to each and every question herein.
- ☐ I do solemnly swear that each and every answer is true, correct, and complete in every respect.
- ☐ I acknowledge that any false information that I provided can preclude me from membership of this department.

Authorization for release of information

I, having made the following application with the South Bay Volunteer Fire Department, in the Town of Cicero, New York, for membership in their volunteer fire department, do hereby authorize the South Bay Fire Department to obtain any records or information regarding my membership application; said information will include arrest and conviction records.

- ☐ I agree to the authorization statement above. My checking this box is done in lieu of signature and is required for this application to be reviewed.

Thank you for your interest in the South Bay Volunteer Fire Department. We look forward to reviewing your application.