



# Volunteer Application



**Return completed application to:**

Harlingen Fire Department/EOC  
24200 N FM 509, Harlingen, TX 78550  
Phone (956) 230-8011

Name (Last, First, M.I.)	How did you hear about us?
Address, City, State, Zip	
Home Phone                      Cell Phone	
Work Phone	
E-mail Address	

### Employment History

Current employment status: <input type="checkbox"/> Employed <input type="checkbox"/> Student <input type="checkbox"/> Not Employed <input type="checkbox"/> Retired	If employed, name and address of employer:
Your current or former occupation:	Current or former volunteer work:

### Character References

<b>Please list two character references:</b>	
Name:	Name:
Address:	Address:
Phone:	Phone:
Relation:	Relation:

Have you ever been convicted of a crime? If yes, please explain what and status:  
 Yes                       No

I certify that the above information is complete and true. I understand that references may be contacted and a background check processed. I understand that the City of Harlingen is not obligated to accept me if, in the City of Harlingen's professional judgment, it would not be in my best interest or the best interest of the Citizens of Harlingen.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_