



Superstition Fire & Medical District

Phone (480) 982-4440 ~ www.sfmd.az.gov

Administration Office
565 North Idaho Road
Apache Junction, AZ 85119
Fax (480) 982-0183

Regional Training Center
3700 East 16th Avenue
Apache Junction, AZ 85119
Fax (480) 982-3268

Fleet & Facilities Services
1455 East 18th Avenue
Apache Junction, AZ 85119
Fax (480) 983-7443



Volunteer Application

Name: _____

Address: _____

Home/Cell Phone _____

Do you currently work or go to school? _____

If yes, where and for how many hours a week? _____

CRIMINAL CONVICTIONS/TRAFFIC VIOLATIONS - Have you ever been convicted of:

1. A misdemeanor, gross misdemeanor, or felony (*excluding juvenile adjudication*)? Yes No

2. A moving traffic violation within the last five years? Yes No

If yes, ATTACH STATEMENT giving date(s), time(s), locations(s), circumstance(s), and dollar amount of fine(s). Include any condition of your parole and/or probation, if applicable. Moving traffic violations will only be considered if driving a vehicle is a job requirement. A criminal conviction does not disqualify the applicant, as each case is considered on its individual merits. LACK OF REQUESTED INFORMATION IS BASIS FOR REJECTING AN APPLICATION.

I am eighteen (18) years of age or older _____ Yes _____ No

Education Level (*check last year completed*): Grade _ 5 _ 6 _ 7 _ 8 High School _ 9 _ 10 _ 11 _ 12 _ G.E.D.

College _ 1 _ 2 _ 3 _ 4 Graduate _ 1 _ 2 _ 3 _ 4 _ 5 Other: _____

Previous Volunteer Experience:

Have you ever worked or volunteered for the Superstition Fire & Medical District? Yes no

If so, when and what did you do?

Special training, skills or interests:

Restrictions that might/will affect your availability for volunteer work:



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READ CAREFULLY BEFORE SIGNING

- I certify that the information given by me in this volunteer application is true and complete and I understand and agree that the application process or my relationship with SFMD may be immediately discontinued if misrepresentations, falsified statements, or material omissions are found to have been made.
- I understand that this application is only valid for the volunteer position applied for at present, and that the Superstition Fire & Medical District is not obligated to retain or consider this application for further openings.
- I understand that my volunteer relationship with SFMD is contingent upon satisfactory results of criminal background check utilizing fingerprint analysis and motor vehicle report.
- In order to assure a drug-free work environment, the SFMD prohibits the use, sale, transfer, being under the influence and/or reporting to duty after using or ingesting drugs. Under SFMD policy, alcohol is included within the meaning and prohibition of drugs.
- Discrimination of any kind, harassment of any kind including sexual harassment, whether intentional or not, is prohibited and will not be tolerated.
- The SFMD has a strong commitment to its volunteers to provide a safe, healthy and secure work environment. While the SFMD has no intention of intruding into the private lives of its volunteers, it requires all volunteers report to work without possessing weapons and to perform their duties without violence or threats toward any other individual. I understand that violence or threats will not be tolerated.
- I understand that my volunteer service is in no way an offer of or employment and that I shall not receive, nor be entitled to receive, any compensation, reimbursement or remuneration for my participation in volunteer service. I agree to release the SFMD from any and all claims to compensation, reimbursement, or remuneration related to my volunteer service. I also understand and agree that at no time will I be considered or deemed to be an agent, servant, or employee of the Superstition Fire & Medical District.
- I understand that during volunteer service, I may have access to, or may observe, certain information that is confidential or proprietary to the SFMD and I hereby agree not to disclose, discuss, or reveal any such information and to keep any information, records, or files confidential.
- I understand that if I receive an identification badge, it will remain the property of the SFMD and be used solely for identification purposes. I understand that I may not use the ID badge to represent myself as an employee or agent of the SFMD other than that which is indicated on the badge.
- I have read the above, understand its content, and meaning, and agree to all of its provisions.

SIGNATURE: _____

DATE _____

Please send application to: Superstition Fire & Medical District
565 North Idaho Road Apache Junction, AZ 85119
Fax: 480-982-0183 or Email: jasmin.jones@sfmd.az.gov