



WORLEY FIRE DISTRICT
31541 SOUTH HIGHWAY 95
WORLEY, IDAHO 83876

Regional Firefighter I Academy Application

(Must be 18 years of age to apply)

Date: _____

Last Name: _____ First: _____

Physical Address: _____

Mailing Address: _____

Home Phone Number: _____ Cell Phone Number: _____

Email Address: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

PERSONAL HISTORY

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

Driver's License No.: _____ State: _____ Endorsement: _____

Date of Birth: _____

Military Status: Have you served in the U.S. Armed Forces? Yes ☐ No ☐

If yes, When? _____ Branch: _____

Have you volunteered at a fire agency? Yes ☐ No ☐

If yes, When? _____ Where: _____

EDUCATION

High School: _____ Location: _____

Graduated? Yes ☐ No ☐ GED: Yes ☐ No ☐

College, University or Trade School: _____

Did you obtain a college degree or vocational certificate? Yes ☐ No ☐

Type of degree or certificate: _____

What discipline was your degree or certificate in? _____

Do not send copies of degrees or certificates.

Applicant's Signature

Date

EMAIL COMPLETED APPLICATION TO: worleyfireacademy@gmail.com