

**LARKIN TOWNSHIP FIRE DEPARTMENT**

**3022 N. Jefferson  
Midland, MI 48642  
989-835-4998**

**FIREFIGHTER APPLICATION FORM**

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

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

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

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

Michigan Driver's License Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Occupation: \_\_\_\_\_

Beneficiary: \_\_\_\_\_

List any medical/physical problem that could limit your ability to perform firefighter duties:

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

List education including firefighter training: \_\_\_\_\_

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

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

*Larkin Township Fire Department positions are open to all applicants as established under law without regard to race, color, age, religion, national origin, disability, sex or marital status.*

10-14-2012