

MEMBERSHIP APPLICATION AND RECORD

_____ **COMPANY**

of the

HALESITE FIRE DEPARTMENT

Name _____
Last First Middle

Address _____

Home Phone _____ Work Phone _____

Cell Phone / Pager _____ DOB _____

E-mail Address: _____

All applications for membership in a Company of the Halesite Fire Department shall be on this form. To be eligible to apply for membership, the applicant must be at least 18 years of age and be a resident of the Halesite Fire District for at least six months preceding his/her application. The applicant must furnish a birth certificate, if requested, and must have his/her parent's or guardian's consent if under the age of 21.

To be completed if the applicant is under 21 years of age;

I am the parent/guardian of _____, who is under 21 years of age, and I do hereby consent to his/her becoming a member of the _____ Company of the Halesite Fire Department.

_____ 20 _____
Date

Parent/Guardian Signature

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PHYSICIAN'S REPORT

_____ has applied for membership in the Halesite Fire Department. The applicant must furnish a physician's report stating that he/she is able, without undue hazard to his/her health or the safety of others, to participate in the usual work of a volunteer fireman, which at times may demand strenuous physical exertion and dexterity. Please state your opinion below, as a physician, as to the applicant's ability to participate in said capacity.

Blood Type _____ Height _____ Weight _____

_____ 20 _____
Date

Physician's Signature

Physician's Name – Please Print

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APPLICANT'S STATEMENT

I was born on the _____ day of _____ 19 ____ in _____
_____. I am / am not a citizen of the United States of
America and have resided at _____, New York
since _____ 19 _____.

The following questions are for the purpose of evaluating my candidacy:

Marital Status: Single _____ Married _____ Widowed _____ Divorced _____

Name & relationship of primary beneficiary: _____

Occupation _____

Business Address _____

Business Telephone _____

Special Skills: _____

Armed Forces Service: Yes _____ No _____

If Yes, give dates & branch of service: _____

Previous Fire Training or Experience: Yes _____ No _____

If Yes, please explain: _____

Have you ever applied for membership in any Fire Company or Rescue Squad?

Yes _____ No _____

If Yes, please explain: _____

Previous First Aid Training or Experience: Yes _____ No _____

If Yes, please explain: _____

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If previously affiliated with another Fire Department or First Aid Squad, please state your standing upon termination of your service with that group.

Have you ever been convicted of a crime? Yes _____ No _____

If Yes, please explain: _____

Are you now, or have you ever been, affiliated with any subversive groups?

Yes _____ No _____

If Yes, please explain: _____

I understand that any false statements in this application shall be grounds for my expulsion from the Halesite Fire Department.

Signature of Applicant

_____ 20 _____

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PROPOSAL

I hereby propose the name of _____ for membership in the _____ Company of the Halesite Fire Department.

Proposer's Signature Date _____ 20 ____

NOMINATION

This application was presented to the _____ Company of the Halesite Fire Department at the meeting held _____ 20 _____. The applicant was nominated by a three-fourths vote of the members of the Company present and voting. I caused his/her name to be posted on the Bulletin Board as a nominee for membership on _____ 20 ____ for a period of at least 28 days. The application was referred to the Board of Officers on _____ 20 _____.

Signature of Company Captain or Lieutenant Date _____ 20 ____

BOARD OF OFFICERS

The Board of Officers has inquired into the character, competency and eligibility of the applicant and recommends in favor of his/her election to the Halesite Fire Department.

Chief of Department Date _____ 20 ____

ELECTION

At a meeting of the _____ Company of the Halesite Fire Department held on _____ 20 _____, the applicant was elected by a three-fourths vote of the members present and voting. The application was referred to the Secretary of the Board of Fire Commissioners on _____ 20 _____.

Signature of Company Captain or Lieutenant Date _____ 20 ____

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BOARD OF FIRE COMMISSIONERS

At a meeting of the Board of Fire Commissioners of the Halesite Fire District held

_____ 20 _____, the applicant was approved for membership and the took the oath of membership.

Signature Chairman of Board of Fire Commissioners

_____ 20 _____
Date

DEPARTMENT SECRETARY

The applicant was entered on the roll call and presented with his badge and credentials.

Signature of Department Secretary

_____ 20 _____
Date

OATH OF MEMBERSHIP

I, _____, having regularly applied for membership in the _____ Company of the Halesite Fire Department, do hereby swear and affirm that I will support, maintain and abide by the Laws of the State of New York governing Fire Districts, the Rules and regulations of the Board of Fire Commissioners, the By-Laws of the Fire Department and the Company to which I have been elected and to obey the orders and commands of my superior Officers.

Signature of Member

_____ 20 _____
Date

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CHIEF'S RECOMMENDATION

_____ has completed one year of service in the Halesite Fire Department. During this period of time his/her attendance at meetings, participation at fires, drills, fire schools, and other activities so ordered has been under close scrutiny. I find that this member's record has been satisfactory.

_____ 20 ____ Chief of
Department Date

I find that this member's record has been unsatisfactory and recommend that the _____ Company initiate proceeding for his/her expulsion.

_____ 20 ____ Chief of
Department Date

FINAL RFEPORT

_____ left the Halesite Fire Department on _____ 20 ____.

Reason:

**SUFFOLK COUNTY POLICE REPORT
and
SUFFOLK COUNTY SHERRIF'S OFFICE SEX OFFENDER REGISTRY
CHECK
REQUEST FROM THE HALESITE FIRE DEPARTMENT**

I hereby authorize the Suffolk County Police Department to perform and release a complete arrest, vehicle and traffic record report along with the Suffolk County Sheriff's Office to perform and release a New York State Sex Offender's Registry Check (including any sealed records) by mail to the Chief's Office of the Halesite Fire Department at 1 North New York Avenue, Halesite, NY 11743.

Name (Last) _____ (First) _____ (MI) _____

Address _____

Drivers Lic.# _____ Date of Birth _____ / _____ / _____

Social Security # _____

Signature _____ Date _____ 20

Sworn to before me this date _____

Notary Public

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NOTICE OF PROPOSED NEW MEMBER

(To be posted on the Bulletin Board for a period of at least 28 days)

The name of _____ residing at

has been proposed for membership in the _____ Company
by _____. The applicant has been nominated
for membership by a three-fourths vote of the members present and voting and shall be voted
upon for election to the Company at its meeting of _____ 20 ____.

Comments in regard to this applicant shall be directed to:

Captain _____ or Lieutenant _____

and to the Board of Officers

**HALESITE FIRE DISTRICT'S
EQUAL EMPLOYMENT OPPORTUNITY AND ANTI-DISCRIMINATION
POLICIES AND COMPLAINT PROCEDURES**

Halesite Fire District is an Equal Opportunity Employer that does not discriminate on the basis of actual or perceived race, creed, color, religion, national origin, ancestry, alienage or citizenship status, age, disability, sex, marital status, familial status, veteran status, sexual orientation, or any other characteristic protected by applicable federal, state or local laws. Our management is dedicated to insuring the fulfillment of this policy with respect to recruitment, hiring, placement, promotion, transfer, training, compensation, benefits, employee activities and general treatment during employment.

Halesite Fire District will endeavor to make a reasonable accommodation to the known physical or mental limitations of qualified employees with disabilities who are capable of performing the essential function of their job unless the accommodation would impose an undue hardship on the operation of Halesite Fire District. If you believe you need assistance to perform your job duties because of physical or mental condition, please let us know.

Any employees with questions or concerns about equal employment opportunities in the workplace are encouraged to bring these issues to one of the following individuals:

Chairman and Vice-Chairman of the Board of Fire Commissioners
1 North New York Avenue
Halesite, New York 11734
Telephone No.: 631-427-0630

Halesite Fire District will not allow any form of retaliation against individuals who raise issues of equal employment opportunity, discrimination or harassment.

Violations of this policy will lead to discipline up to and including discharge.

ANTI-HARASSMENT POLICY

Harassment in the workplace relating to any employee's membership in a category protected by law is illegal and all employees are forbidden from engaging in such activity in any manner. Halesite Fire District is committed to providing a work environment free from all forms of unlawful harassment or intimidation. This policy applies to sexual harassment, as well as harassment based on race, creed, color, religion, national origin, ancestry, alienage or citizenship status, age, disability, sex, marital status, familial status, veteran status, sexual orientation, or any other characteristic protected by applicable federal, state or local laws.

A. This policy applies to all applicants and employees, whether related to conduct engaged in by an employee or someone not directly connected to Halesite Fire District (e.g., outside vendors, consultants, customers).

B. This anti—harassment policy includes, but is not limited to, inappropriate forms of behavior described below under the Definition of Sexual Harassment.

C. To assure compliance with this policy, supervisors and managerial personnel must take timely and appropriate corrective action when instances of impermissible harassment come to their attention.

D. Appropriate disciplinary action, which may include termination, will be taken against any individual who violates this policy.

E. All employees will be held responsible and accountable for avoiding or eliminating prohibited conduct.

F. Retaliation against any individual because he or she has filed a discrimination or harassment complaint is illegal and will result in disciplinary action. Intimidation, coercion, threats, reprisals or discrimination against any individual resulting from the filing of a complaint under this policy is prohibited.

DEFINITION OF SEXUAL HARASSMENT

1. Sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute sexual harassment when:

A. Submission to such conduct is made whether explicitly or implicitly a term or condition of an individual's employment; or

B. Submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting the individual, such as promotion, transfer, or termination; or

C. Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating or hostile or offensive working environment.

2. Sexual harassment refers to behavior that is not welcome; that is, or would be, offensive to a person of reasonable sensitivity and sensibilities; that fails to respect the rights of another; and that, therefore, unreasonably interferes with an employee's work performance and

effectiveness, or creates an intimidating, hostile or offensive working environment. It makes no difference if the harassment is “just joking” or “teasing” or “playful”. Such conduct may be just as offensive as any other type of harassment.

Specific forms of behavior that may constitute sexual harassment include, but are not limited to, the following:

VERBAL

Explicit or implicit threats of retribution, or promises of benefits, in return for sexual favors.

Abusive language related to an employee’s sex or sexual orientation, including sexual innuendoes, slurs, suggestive, derogatory or insulting comments or sounds, whistling, jokes of a sexual nature or concerning gender-specific traits, sexual propositions and threats.

Use of demeaning or offensive words when referring to a particular sex or sexual orientation.

Demands for sexual favors or sexually oriented comments about an individual’s body or appearance, sexual habits, sexual preference, or sexual desirability that are unwelcome and reasonably interfere with an employees’ work performance or create an intimidating, hostile, or offensive working environment.

Sexual harassment is not limited to oral comments. Abusive written language, showing or displaying pornographic or sexually explicit objects or pictures, graphic commentaries or obscene gestures in the work place, which unreasonably interfere with an employee’s work performance or create an intimidating, hostile, or offensive working environment, are also prohibited.

PHYSICAL

Any sexual advance involving physical contact that is not welcome, including touching, petting, pinching, coerced sexual intercourse, assault or frequent brushing up against a person’s body.

HARASSMENT BASED ON MEMBERSHIP IN OTHER CATEGORIES PROTECTED BY LAW

This policy bars harassment relating to an employee’s membership in other categories protected by law. These categories include race, creed, color, religion, national origin, ancestry, alienage or citizenship status, age, disability, sex, marital status, familial status, veteran status, sexual orientation, or any other characteristic protected by applicable federal, state or local laws. Offensive or abusive conduct or language relating to an employee’s membership in a protected category falls within this Anti-harassment policy. Any employee who feels he or she has been the victim of such harassment should follow the complaint procedure set forth below.

COMPLAINT PROCEDURE

1. Any person who feels that he or she has been the victim of impermissible harassment, or has witnessed such activity, is strongly encouraged to immediately report the incident to the individuals listed on the first page of this document:

Chairman and Vice-Chairman of the Board of Fire Commissioners

1 North New York Avenue
Halesite, New York 11734
Telephone No.: 631-427-0630

2. It is preferred, but not required, that an employee file a written complaint (Form A).
3. All complaints will be investigated in a timely manner.
4. Confidentiality will be maintained to the maximum extent possible, consistent with Halesite Fire District's obligation to conduct a thorough investigation. All individuals who become involved in the investigation are required and directed to treat the matter confidentially, and a Violation of this directive will, in itself, be grounds for disciplinary action.
5. Investigation of a complaint will normally include conferring with the parties involved and any named or apparent witnesses. The particular facts of the allegation will be examined individually, with a focus upon the nature of the behavior, the pattern of such conduct, if any, and the context in which the incident(s) occurred.
6. Individuals who believe they have been unjustly charged with violating this Policy will be afforded the opportunity to present information in their defense.
7. Anyone who participates in this procedure may do so without fear of retaliation. Retaliation against anyone because he or she has filed a discrimination or harassment complaint is illegal and grounds for disciplinary action, which may include termination.
8. An individual who is found to have committed an act of impermissible harassment will be subject to appropriate disciplinary action, which may include termination.

FORM A
Complaint of Discrimination, Harassment or Retaliation

Date of Complaint: _____

Date of Incident: _____

Complaint: _____

Description of Incident: (Attach additional sheets if necessary)

Name(s) of witness(es), if any: _____

Has the incident been reported before: _____

If yes, when, to whom, and what was the resolution:

Complainant: _____

Complaint Received by: _____

Date Received: _____

**ACKNOWLEDGMENT OF RECEIPT OF ANTI-DISCRIMINATION POLICY, COMPLAINT
PROCEDURE AND FORM A**

I hereby acknowledge receipt of the Anti—Discrimination Policy, Complaint Procedure and Form A.

Name of Member/ Employee

Date Received

I have read and understand Halesite Fire District's Equal Employment Opportunity and Anti—Discrimination Policies and Complaint Procedures.

Name: _____

Date: _____

**HALESITE FIRE DISTRICT
WORKPLACE VIOLENCE PREVENTION POLICY 85 INCIDENT REPORTING**

Halesite Fire District is committed to the safety and security of our employees. Workplace violence presents a serious occupational safety hazard to our agency, staff, and clients. Threats, threatening behavior, or acts of violence against employees, visitors, guest, or other individuals by anyone or Halesite Fire District property will be thoroughly investigated and appropriate action will be taken, including summoning criminal justice authorities when warranted. All employees are responsible for helping to create an environment of mutual respect for each other as well as clients, following all policies, procedures and program requirements, and for assisting in maintaining a safe and secure work environment.

This policy is designated to meet the requirements of NYS Labor Law 27b and highlights some of the elements that are found within our Workplace Violence Prevention Program. The process involved in complying with this law included a workplace evaluation that was designed to identify the workplace violence hazards our employees could be exposed to. Other tools that were utilized during this process included establishing a committee made up of management and Authorized Employee Representatives who will have an ongoing role of participation in the evaluation process, recommending methods to reduce or eliminate the hazards identified during the process and investigating workplace violence incidents or allegations. All employees will participate in the annual Workplace Violence Prevention Training Program.

The goal of this policy is to promote the safety and well-being of all people in our workplace. All incidents of violence or threatening behavior will be responded to immediately upon notification. Halesite Fire District had identified response personnel that include a member of management and an employee representative. If appropriate, the Halesite Fire District will provide counseling services or referrals for employees.

All Halesite Fire District personnel are responsible for notifying the contact person designated below of any violent incidents, threatening behavior, including threats they have witnessed, received, or have been told that another person has witnessed or received.

Designated Contact Persons:

Chairman and Vice-Chairman of the Board of Fire Commissioners
1 North New York Avenue
Halesite, New York 11734
Telephone No.: 631-427-0630