Citizen's Fire Academy Application

Last Name	
First Name	
Middle Name	
Address	
City	
State/Zip	
Day Phone	
Evening Phone	
E-mail	
Date of Birth	
Shirt Size	☐S ☐M ☐L ☐XL ☐XXL
Employer	
Address	
City	
State/Zip	
Work Phone	
Supervisor	

Have you ever been arrested? _____ If yes, please explain _____

_____

_____

_____

How did you hear about the Citizen's Fire Academy?

_____

What is your purpose of attending?

_____

Please return: *Application and Consent for Criminal Background Check Authorization Form, as well as a copy of your Drivers License or State Approved Photo ID*

to:

Frisco Fire Department
Citizen's Fire Academy
8601 Gary Burns Drive
Frisco, TX 75034
or
972-292-6329 (fax)

VERIFYI

Background Verification Release Form

AGENCY INFORMATION

Date	Agency Name **City of Frisco – CFA**
Contact Name **Pam Nelson**	
Agency's Main Phone Number **972-292-6300**	Agency's Fax Number **972-292-6329**

APPLICANT INFORMATION:

Applicant Full Name (Last, First, MI)			Maiden or Other Name(s) Used
Current Address			
City	State	Zip Code	County
Social Security Number	Date of Birth	Driver's License Number	State Issued
Position Applied For			
Gender ❑ Male ❑ Female	**Race** ❑ African American ❑ American Indian ❑ Anglo ❑ Asian ❑ Hispanic ❑ Other		

I hereby authorize VERIFYI and or its Service Provider to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

The criminal history, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct as committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by client/agency and a procedure is available for clarification, if I dispute the record as received. I also understand that the criminal history could contain information presumed to be expunged.

I further release and discharge VERIFYI and their Service Provider and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to VeriFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment/volunteer purposes, and I have carefully read and understand this authorization.

Applicant's Signature _____ Date _____

Applicant's Printed Name _____ Parent/Guardian's Signature (if under 18 years of age) _____