

NAME

First Name | Middle Initial | Last Name

ADDRESS

Street Address

City | State | Zip Code

DATE OF BIRTH

MM / DD / YYYY

PHONE NUMBER

( ) ___ - _____

EMAIL ADDRESS

Email Address

WHAT KIND OF PHONE DO YOU USE?

☐ iPhone ☐ Android ☐ Other _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY?

☐ Yes ☐ No

DO YOU HAVE A VALID OKLAHOMA DRIVERS LICENSE?

☐ Yes ☐ No

DO YOU HAVE ANY LIMITATIONS THAT COULD PREVENT YOU FROM PHYSICAL LABOR?

☐ Yes ☐ No

If yes, please explain:

SCAN OR TAKE A PHOTO OF YOUR COMPLETED APPLICATION AND EMAIL IT TO:

chief@opvfd.org *and* **assistantchief@opvfd.org**