

Thomaston Volunteer Fire Department, Inc.
245 South Main Street, Thomaston, CT 06787

Information Needed for Applicant's Background Check

- 1) Full Name: _____
 First Name Middle Name Last Name

- 2) Other Names or Nicknames You Are Known As:

- 3) Social Security Number: _____

- 4) Complete Address: _____

- 5) E-Mail Address: _____

- 6) Date of Birth: _____

- 7) Telephone Number: _____

- 8) Telephone Type: Mobile Home Work Fax

- 9) Are You a U.S. Citizen: _____

The above information will remain confidential and will only be used for Departmental purposes. This form will remain in secured Department files.