

VIRGINIA BEACH FIRE DEPARTMENT
APPLICATION – VOL. SUPPORT TECHNICIAN to SUPPORT TECHNICIAN (ENHANCED)

NAME: _____ FDID NUMBER: _____

ADDRESS: _____

PHONE NUMBER: _____ ALT PHONE NUMBER: _____

E-MAIL: _____ DATE: _____

DATE ENTERED DEPARTMENT: _____

DATE COMPLETED FORMAL TRAINING: _____

COMPLETED IN-STATION TRAINING:

A-SHIFT: _____ DATE: _____

B-SHIFT: _____ DATE: _____

C-SHIFT: _____ DATE: _____

Give a brief reason for your request to be advanced to the Volunteer Support Technician (Enhanced) level. Site any background information or additional training you have received that would contribute to this request. Include a summation of extra shifts that you have performed (exact dates not required) or services you have undertaken in support of the volunteer fire system. (Use reverse side if additional space is required – Attach any supporting documentation or recommendations that are appropriate to the position requested):

BATTALION 30 APPROVAL: _____
W. F. Richardson, Volunteer Battalion Chief

DATE: _____

FIRE TRAINING APPROVAL: _____

DATE: _____