

Albion Volunteer Fire and Rescue Department  
Application for Membership

PERSONAL INFORMATION

Last Name: Hamling First Name: Aaron Middle Initial: 0

Address: 326 S 7th St Sex:  Male  Female

City: Albion State: NE Zip: 68620

Email: aaron1393.ah@gmail.com Valid Nebraska Driver's License #: H13314823

Cell Phone: 402-741-0486 Home Phone: \_\_\_\_\_ Work Phone: 402-395-5051

Date of Birth: 8-13-1993 U.S. Citizen:  Yes  No

MILITARY SERVICE

Branch: \_\_\_\_\_ Years in Service: \_\_\_\_\_ Are You Still Actively Serving:  Yes  No

EMPLOYMENT HISTORY

Present Employer: Helena Position Held: Applicator

Work Address: 2493 State Hwy 14 Telephone Number: 402-395-5051

City: Albion State: NE Zip: 68620

Work Schedule

Shift Length

Straight Days  Straight Nights

8 hour  10 hour  12 hour Other: \_\_\_\_\_

Straight Evening Shift Work

Will your employer allow you to leave work, or be late for work, due to a fire or rescue call?  Yes  No

May we contact your employer?  Yes  No

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**BACKGROUND INFORMATION**

Have you ever been convicted of a felony? Yes  No

Have you ever been convicted of a crime (Except Traffic Violation): Yes  No

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TRAFFIC RECORD**

Has your driver's license ever been suspended or revoked? Yes  No

If Yes, give date, location & reason:

Offense Charged: \_\_\_\_\_ City/County: \_\_\_\_\_ State: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

List all traffic citations you have received in the last five years: (Excluding Parking Tickets)

Offense Charged: \_\_\_\_\_ City/County: \_\_\_\_\_ State: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

List any accidents within the last (3) years: (Excluding Parking Tickets)

Location: \_\_\_\_\_ Date: \_\_\_\_\_ At Fault: Yes  No

**EDUCATION**

High School: Boone Central State: NE Dates of Attendance: ~~4~~ 4 years

Did you graduate:  Yes  No

If you did not graduate high school, did you attain a GED? Yes  No

College: SCC - Milford State: NE Dates of Attendance: 21 months

Degree: John Deere Tech

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FIREFIGHTING EXPERIENCE & TRAINING

Have you previously been a member of a fire department? Yes  No  Dates Served: \_\_\_\_\_

If Yes, List Department: \_\_\_\_\_

Address: \_\_\_\_\_ Last Ranking Position Held: \_\_\_\_\_

Are you a certified Firefighter? Yes  No  Level: \_\_\_\_\_ Date Received: \_\_\_\_\_

Are you a certified EMT? Yes  No  Level: \_\_\_\_\_ Date Received: \_\_\_\_\_

Have you attended any fire training: Yes  No  Attach copies of certificates you have received

Have you had any first aid training: Yes  No  Attach copies of certificates you have received

Please circle one below

I will be able to respond to:  All Calls  Day Calls Only  Night Calls Only

REFERENCES

Have you ever applied for membership with Albion Volunteer Fire and Rescue Department? Yes  No

Are you a member of another Fire Department? Yes  No

List members of Albion Volunteer Fire and Rescue Department with whom you are acquainted:

Taylor Nelson, Mark Tisthammer, Whitney Paulson

Do you have any physical, mental or medical impairment or disability that would impair or limit your duties as a Firefighter or EMT? Yes  No

AGREEMENT

I, Aaron Hamling, do hereby make application for membership in the Albion Volunteer Fire and Rescue Department. I have read and understand the constitution and by-laws of the department and agree to perform all duties and accept the responsibilities as outlined above. I certify that all answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application as may be necessary in arriving at a decision. In the event of acceptance, I understand that false or misleading information given in my application or interview may result in suspension or termination.

Signature: Aaron J Hamling Date: 3-1-26

This Application is co-signed by the following two active members of the Albion Volunteer Fire and Rescue Department.

(1) [Signature] (2) [Signature]



## Release of Information

I understand that if I am chosen as a top candidate my background information will be checked and considered as a result of my application for employment or promotion. This information may include but is not limited to the following:

- Employment Verification
- Reference Checks
- Motor Vehicle Driving Record
- Criminal History
- Sexual Offender Registry
- Social Media Sites
- Verification of educational credentials through original transcripts which you may be asked to provide

I understand that any false information on my application will be sufficient reason for rejection of my application or termination of my employment. I herewith authorize and request each and every former employer, person, firm, corporation and educational institution to answer any and all questions that may be asked and herewith hold such persons harmless for giving any and all information within their knowledge or records.

My signature on this document will serve as authorization to release any and all information to the Albion Volunteer Fire and Rescue Department and/or the City of Albion. A photocopy or facsimile of this document is as valid as the original.

Applicants Name (Please Print) Aaron D Hamling

Applicants Signature Aaron D Hamling

Date 3-1-26