NORTH-WEST FIRE PROTECTION DISTRICT

VOLUNTEER FIREFIGHTER STIPEND FORM

Name: _____ **Year_____**

Please Print

Training requirements met for the last 12 months? **Yes ____** **No _____**

Shifts worked during the last 12 months (**Volunteers Appointed <u>On or After</u> 1/1/2007**):

DATE OF SHIFT	DATE OF SHIFT

Call responses during the last 12 months **(Volunteers Appointed <u>On or Before</u> 12/31/2006**):

DATE OF RESPONSE	TYPE OF RESPONSE	OFFICER IN CHARGE
PERCENTAGE OF TOTAL ANNUAL RESPONSES:	_____%	

I certify the training and shift/call response information stated is true and accurate.

By : _____

(Volunteer's Signature) **(Date)**

I certify that I have verified the accuracy of the training and shift/call response information stated.

By : _____

(Supervisor's Signature) **(Date)**

Approved: _____

Fire Chief

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