Name of Fire Department:
Year: 2019

Last Name	First Name	Current Active Volunteer Firefigher (Y/N)	Firefighter has 5 or more years of faithful and actual service as an Interior Firefighter (Y/N)	Firefighter has passed at least 5 verifiable annual Fit Tests (Y/N)	Firefighter had a verifiable physical upon entry to the department (Y/N)	Date of entry to the fire department (mm/dd/yyyy)

Census Verified by:

_____

Signature