

**EUREKA FIRE RESCUE AND EMS  
304 THIRD AVENUE  
(724) 224-1499  
APPLICATION OF ACCEPTANCE**

(To be completed if you are under the age of 18)

Background Check

Parental/Legal Guardian Consent Form

I acknowledge that my child's eligibility for membership in Eureka Fire Rescue EMS is Contingent on the outcome of a background check. By my signature below, I Acknowledge that I have given my consent for Eureka Fire Rescue EMS to conduct a Background check of my child including, but not limited to: obtaining my child's criminal history record information, county court records, municipal court records and school disciplinary records. I further consent to my child's cooperation in supplying sufficient information to allow such a background check to be conducted, including supplying a fingerprint sample. I understand that this information will be used to evaluate my child's eligibility for membership in Eureka Fire Rescue EMS. I understand that if I refuse to consent to this background check, my child's application for membership shall not be considered.

I understand that my child shall be informed of the results of this background check and shall be granted the opportunity to correct any errors in the records obtained.

---

Parent/Legal Guardian Signature

---

Date

---

Print Signature