

Bunker Hill Fire Protection District

MABAS 35 IDENTIFICATION CARD APPLICATION

The information requested on this form is necessary to meet the requirement set by the Illinois State Legislature or is information required by the issuing authority to be displayed on the ID card.

PRINT CLEARLY, ILLEGIBLE ENTRIES WILL DELAY ISSUE OF THE ID.

Fire Department	Title / Rank

Full name (first, middle, last, Jr/Sr/etc)	Employee ID Number (if applicable)

Member since:	
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Street address	City, state, Zip	Driver's License#

DOB (xx/xx/xx)	Height (ft, in)	Weight (lbs)	Hair color	Eye color

Blood Type	Drug allergies / Special medical information

Applicants Signature	Circle highest level of medical certification
	<p>FIRST RESPONDER</p> <p>EMT-B EMT-P</p>
DO NOT SIGN OUTSIDE OF THE BOX	

Completed form may be taken to :

Budget Signs
333 E., Edwardsville Rd.
Wood River, IL 62095

Or can be scanned and emailed along with a headshot (Drivers license style) picture to:
info@awardsbybudgetsigns.com