



SNOHOMISH COUNTY FIRE DISTRICT SEVEN Non-Member Observer Application

(To be completed in accordance with District Procedure 3-16)

Non-Member Observer Name:	
Date of Birth:	
Address:	
Phone:	
Email Address:	
Emergency Contact Name:	
Emergency Contact Phone:	

Date of Observation:	
Purpose for Observation:	
Affected Shift:	
Station Assignment Requested:	
Requested Observation Hours:	
Referred By:	

Photo Copy of Applicant's Drivers License:	Photo Copy of Applicant's Dept. I.D. (if applicable):
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Attach signed copy of District Release of Liability Form. Participants under the age of 18 must have the form signed by a parent or legal guardian.

Applicant Signature

Battalion Chief Signature

Deputy Chief of EMS Signature
(EMS Student Observers)

Assistant Chief of Operations Signature
(Non-EMS Student Observers)