

**DeKalb County Fire Department  
Application to Hold the Office of  
Communications Officer**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Date of Birth (mm/dd/yy):** \_\_\_\_\_

**Please answer the following questions with “yes” or “no”:**

1. Do you have good organizational skills? \_\_\_\_\_
2. Do you have a background and good skill in working with communications equipment (phones, radios, and computers) technology? \_\_\_\_\_
3. Do you have good people skills? \_\_\_\_\_
4. Are you proficient in social media? \_\_\_\_\_

**Applications must be submitted no later than December 31 of each year, prior to the annual officer elections in January.**