

If yes, please list offense and dates: _____

School: _____ Principal: _____

Current Grade: _____ Current Grade Average: _____

Place of Employment: _____

Employer's Address: _____

City: _____ State: _____ Zip: _____

Job Title: _____ Working Hours: _____

Days Worked During the Week: _____

What times would you be available to run calls?

Any previous experience in the Fire or Rescue Service:

(Please list department and time you were a member)

Please check any certifications you currently hold:

FFI _____ FFII _____ Medical Responder _____

EMT _____ Haz-Mat Awareness _____ Haz-Mat Operations _____

Rescue Tech (VMR) _____ CPR _____ Other _____

References:

1. Name: _____ Phone Number: (____) ____ - _____

2. Name: _____ Phone Number: (____) ____ - _____

3. Name: _____ Phone Number: (____) ____ - _____

Cadet Rules and Regulations

- **All Cadet Members will be between the ages of 15 and 18. Persons age 14 may apply if a parent or guardian are members of the department.**
- **All members should live within the Fire District or within 1 ½ miles of the district line.**
- **All Applicants must obtain a copy of their Criminal Background to the Membership Committee before being accepted as a member.**
- **All Cadet Members should be enrolled in school and must maintain at least a “C” grade average. A copy of all grades must be presented at the end of each grading period**
- **All Cadets will need to have a Parental / Guardian Release Form, and the School Permission Form signed and returned to the Chief or Membership Committee.**
- **Each Applicant will serve a six-month Probationary Period. During this period each applicant will be evaluated monthly to ensure satisfactory progress is being made, and must complete the Skills and Knowledge Test.**
- **Each member is required to maintain 36 hours of documented training each year.**
- **At NO time will alcohol or drugs be allowed on Fire Department premises, nor will any member be allowed to respond to calls or take part in any department function while under the influence of drugs or alcohol.**
- **Cadet members are not allowed to participate in department functions, or run calls during school hours.**
- **All Cadet members will have a 10:00 curfew on a night prior to a school day. A midnight curfew exists on nights when school will not be in session the next day.**
- **At NO time will cadet firefighters be allowed in the station without a Senior Firefighter on site.**
- **Cadets will not use red lights, four-way flashers, flashing headlights, or any other warning devices at any time. They must also abide by all traffic laws at all times.**
- **When arriving on the scene of an incident each member must report to the first arriving apparatus and await an assignment by the Incident Commander.**
- **Any Cadet Member may be dismissed at any time by the Fire Chief when performance does not meet the guidelines.**

Conditions of Membership Statement

I declare that the answers to the above questions are true to the best of my knowledge. My signature below gives the Old Richmond Volunteer Fire and Rescue Department the right to investigate any and all information given and to obtain additional appropriate information if necessary.

I understand that an investigative report may be made from information obtained through personal interviews with others. I also understand that this inquiry may include information regarding to my character, general reputation, and personal characteristics.

I further understand that the completion of this application does not assure me a position with the Old Richmond Volunteer Fire and Rescue Department and does not obligate the department to me in any way.

I understand that any willful misleading or incorrect statements or information, or the failure to complete all questions may render this application void.

Signature of Applicant

Date

Old Richmond Fire and Rescue Department

7975 Reynolda Rd
Pffafftown, NC 27040
(336) 924-6867
www.olderichmondffd.com

Parent / Guardian Release Form

This document must be signed by both the Applicant and his/her parent or legal guardian and returned to the Old Richmond Fire Department before membership will be allowed and before any equipment will be issued.

I, _____, hereby acknowledge that I and my son/daughter, _____ have read and understand the "Rules and Regulations" for the Old Richmond Fire Department Cadet Program. I will allow my son/daughter to participate in any and all adult-supervised activities within the Department. I understand that my son/daughter will have complete insurance coverage including Workers' Compensation while participating as a Cadet.

I also understand that by signing this form that I, the Parent/Guardian, will be responsible for any and all equipment that is lost, stolen, or damaged due to negligence, abuse, or misuse.

Signature of Applicant

Date

Signature of Parent / Guardian

Date