



Wheelock Volunteer Fire Department

Department Phone/Fax: 979-828-2163
Physical Address: 12347 S FM 46 Wheelock, Tx 77882
Mailing Address: Po Box 302 Wheelock, Tx 77882

JUNIOR FIREFIGHTER APPLICATION

For All Applicants 12-17 Years Of Age

Today's Date _____

Last Name _____ Middle Initial _____ First Name _____

Date of Birth ____/____/____ Driver's License # _____ State _____
If applicable

Address _____ City _____ State _____ Zip Code _____

County _____ Home Phone: _____ Cell Phone: _____

Alternate Address (If Needed) _____ City _____ State _____ Zip Code _____

County _____ Alternate Phone(If Needed) _____

Are you related to a member of the Wheelock Vol. Fire Dept. Yes No (If yes list below)

Parent / Guardian Information

Last Name _____ First Name _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Emergency Contact: (If different)

Last Name _____ First Name _____

Phone Number _____ Relation to you: _____

Medical Information:

Your Doctor's Name _____ Phone Number _____

Are you on any Medications? Yes No (If yes list medications below and what they treat)

Are you allergic to anything? Yes No (If yes list below) Will you submit to a drug test? Yes No

Do you have any limitations (physical, medical, psychological) that could prevent you from performing the duties of a firefighter? Yes No (If yes list below)

List any accommodations you might need to perform your duties:

Background Information:

School Attending: _____

Are you maintaining a 'C' average or better Yes No
(Please attach a copy of your most recent report card.)

Grade Level: 6 7 8 9
10 11 12

What interests you most about becoming involved with the Wheelock Volunteer Fire Department? (list below)

Are you able to attend meetings and training on a regular basis (most meeting are on a Monday night from 7-9pm)? Yes No (If No list below)

Have you been arrested, ticketed or fined? Yes No (If yes list date and charge below)

Work Information:

Current Employer: _____

Address _____ City _____ State _____ Zip Code _____

Phone Number _____ Your Position/Title/Duties: _____

Supervisor Name/Title: _____

May we contact your employer? Yes No

How many hours per week do you usually work when school is in session? _____

How many hours per week do you usually work when school is not in session? _____

Note: Child Labor Laws may limit your availability to be active in the department or your paid job. You may list any other pertinent work history on the back of this page.

Any other extracurricular activities you would like us to consider: (sports, church, leadership, etc.)

NOTICE: All information on this application may be viewed by ALL members of the Wheelock V.F.D. prior to a decision being rendered on above application.

References

We would like to call at least two people who are not related to you and have a definite knowledge of your qualifications for membership in the Wheelock Vol. Fire Dept. Do not repeat names listed above.

Reference 1 Friend, Co-worker, Religious leader, etc:

First Name _____ Last Name _____ Phone Number _____

E-mail _____ Best time to contact them: _____

Reference 2 Friend of family, Employer, Neighbor, etc:

First Name _____ Last Name _____ Phone Number _____

E-mail _____ Best time to contact them: _____

Junior Program Agreement :

I do hereby promise to adhere to and abide by the rules and regulations set forth by Texas State Law, Texas Child Labor Laws, Wheelock Volunteer Fire Department, and Junior Firefighter Program Guidelines. I understand that I am not to appear at a fire scene, training event or department function under the influence of drugs or alcohol. I agree to abide by all traffic laws when responding to an incident. I understand that it is the right of Wheelock Volunteer Fire Department to terminate this program at any time for any reason. Upon my termination (voluntary or involuntary), I will surrender all issued equipment in a timely manner.

_____ Print and sign here

_____ Print and date here

Parental Consent:

My son/daughter _____ has my permission to be a Junior Firefighter with the Wheelock Volunteer Fire Department. I give my consent to allow them to be a Junior Firefighter and do not hold the Wheelock Volunteer Fire Department or Robertson County responsible for any actions caused by my son/daughter that is not under the direction of an Officer. I and my son/daughter have read ALL of the Junior Firefighter Guidelines and understand the guidelines set up to outline the purpose of the Junior Firefighters. I and my son/daughter understand that Junior Firefighters serve as supporters of the Wheelock Firefighters to learn the basics of Firefighting and to prepare to become a full member at the age of 18. I and my son/daughter understand that Junior Firefighters are to follow all instructions from members of Wheelock Volunteer Fire Department and that the general standard of conduct is to act in the manner of a professional. I and my son/daughter understand that he/she is expected to be courteous and respectful of other members (Junior and Regular) and to all citizens as they are representing the Wheelock Volunteer Fire Department. I and my son/daughter understand there is a zero tolerance policy regarding drug and alcohol use. I and my son/daughter understand that by signing this application we are declaring that any violation of the guidelines is grounds for immediate dismissal. I and my son/daughter understand that any acts that violate the guidelines and that are illegal by state law will be referred to the Robertson County Sheriff's Department.

_____ Print and sign here

_____ Print and date here

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