Orland Fire Protection District
Fire Cadet Application
9790 W. 151st Street
Orland Park, IL 60462
708-349-0074
Fax 708-349-0354

Prospective Cadet,

Thank you for your interest in the Orland Fire Cadet program. This application is the beginning of the process to become a member of the Orland Fire Cadet program. To be considered for the program, you must be between the ages of 16 and 20 years old and provide all of the required documents below. Once you have completed the application and gathered all the necessary documents, please return the application in an envelope to the Orland Fire Protection District Headquarters located at 9790 W. 151<sup>st</sup> Street, Orland Park, IL 60462. If you have any questions please do not hesitate to contact any member of the Orland Fire Cadet staff.

Thank You

Lt Joshua Girdick
Cadet Coordinator
j.girdick@orlandfire.org

Application Checklist:

 APPLICATION	 CURRENT GRADE REPORT
 COPY OF DRIVERS LICENSE	 COPY OF CERTIFICATES, IF APPLICABLE
 RECOMMENDATION LETTER	 ESSAY

#### **CONTACT INFORMATION**

Name:	<del>-</del>	
Address:	City:	Zip:
Home Phone: ( )	Cell Phone: (	)
Cell Phone Provider (i.e. Veriz	zon)	
Email Address:		
	1 Talil	
Date of Birth:/	/ Age: SS#:	
ID or Drivers License #		1000
Employer:	Address:	PA VERSA
Years Employed:	Immediate <mark>Supervisor</mark> 's Name:	<u> </u>
Mother's Name:		NY ASSI
Father's Name:		
EMERGE	ENCY CONTACT INFORM	1ATION
Name:	Relationship	2
Home Phone: ( )		7
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Describe any medical condition	ons you may have:	
List any medications that you cu	irrently take or have taken in the last 3 yea	rs:
Do you have any allergies? If yes	s, please explain:	

Please answer the following questions:

Have you ever been a cadet with another fire or police department, scout troop, etc? If yes, please state the organization and how long you were/have been a member, or why you are no longer affiliated with the organization.					
Are you involved in any sports, clubs or other activities at school or in the community?					
What was your G.P.A. in your most recent school year?					
As an Orland Fire Cadet, you will be expected to maintain a C average at all times. Also, when report cards are issued, you will be expected to turn in a copy for your file. Will this be a problem?					
Have you ever been convicted of a crime other than a minor traffic charge? If yes, please state the nature of the offence and the disposition by the court.					
Have you ever received any disciplinary action from your school (i.e. detention, suspension, expulsion)? If yes, please explain:					
Do you have any problems with giving up free time to participate in cadet and fire department related activities?					
What are some of your future goals?					
What are some things you hope to accomplish by joining the Orland Fire Cadet program?					

Please list references that you have known for at least six months or longer that are not teenage friends or relatives. Please include phone numbers that they can be contacted at, also where you know them from (i.e. work, school counselor, family friend, neighbor) and how long you have known the individual. Please have at least one of your references write a recommendation letter for you and attach it to your application.

Name

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A STREET						
Do you currently have and certificates? (i.e. CPR card, EMT, FFII) Please list them below and provide a copy:						
Do you currently have any family members in the Fire Service? If yes, please list name and department:						
How did you hear about the Orland Fire Cadet Program?						
	any family members in th	any family members in the Fire Service? If yes, ple				

\*Please type a brief essay on why you would like to become an Orland Fire Cadet and what qualities would you bring to the Cadet program. Return your essay with your application.\*

Note: Failure to answer all questions TRUTHFULLY will result in the AUTOMATIC REJECTION of your application and your possible position with the Orland Fire Cadet program.

Any and all information attained through the application or background check will be held in the strictest of security for the benefit and respect of the applicant.

If you wish to include any other information on yourself, please do so as it could be to your benefit.

I have filled out the above information to the best of my ability and knowledge. I also understand that any form of falsification on this document or interview will result in my immediate termination from the Orland Fire Cadet program.

I understand that prior to being accepted into the Orland Fire Cadet program, I must obtain a background check, drug screen and medical evaluation at my own expense (approximately \$215), and that I will not obtain these until instructed to do so by the Cadet Coordinator. If you are unable to afford the background check, drug screen and medical evaluation because of a financial hardship, please advise the Cadet Coordinator and we will evaluate each hardship on a case by case basis.

Signature:		Date:
Print Name:	اللاق	Till Comments
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	ire Cadet program. By th	ation as well as read and understand the is we hereby grant permission for our program.
Parental Guar <mark>dia</mark> n:	The state of the s	Date:
Print Name:	FOR OFFICE U	
Accepted: Yes	Interviewed by:	
No	Interview date:	
Cadet Coordinator:		Date:
Bat. Chief:		Date:
Roster start date:		