

"A Culture of Excellent Service"

### **Cadet Program**

### **PURPOSE:**

The Cadet Program is a hands on program open to young men and women from ages 15 - 18 years of age with an interest in learning more about a career in the field of fire or emergency services.

### **REQUIREMENTS:**

Each applicant must meet the following criteria:

- 1. Be between 15 years of age and 18 years of age.
- 2. Be in good health and provide a copy of a sport level physical for review by our physician.
- 3. Must complete the membership application, emergency information sheet and release and indemnification forms.
- 4. Capable of passing a criminal history background check.
- 5. Must be physically able to perform the duties of a Fire Cadet.
- 6. Must maintain a "C" average or better while attending school.
- 7. Must provide own transportation to the station.
- 8. Must be of good character.
- 9. Must provide a letter of recommendation from a current school teacher or sponsor who is an active firefighter.
- 10. Participate in department trainings and meetings.
- 11. Must reside within 10 miles of Minooka Fire Protection District.

#### **CADET ACTIVITIES:**

- 1. Firefighter basic training
- 2. Instruction in first aid and cardiopulmonary resuscitation
- 3. Supervised ride-a-long as an observer
- 4. Get a glimpse into the day-to-day life of a Firefighter/Paramedic
- 5. Participate in training that will assist in obtaining a position as a career Firefighter/
  Paramedic

### **PROGRAM GOALS:**

- Build self worth and self confidence
- Character development
- · Leadership skills training
- Social development
- Unique and exciting career experiences
- Personal growth
- Community service opportunities
- Group collaboration and teamwork
- Career readiness preparation

### **COURSE TRAINING SUBJECTS:**

As a guideline, the following course outline may be the first step of the training levels as established by this department and as recommended by the National Fire Protection Association.

- 1. Orientation
- 2. Fire Behavior
- 3. Communications
- 4. Ropes and Knots
- 5. Rescue Operations
- 6. First Aide
- 7. Forcible Entry
- 8. Ventilation
- 9. Fire Inspections

- 10. Automatic Sprinklers
- 11. Salvage
- 12. Breathing Apparatus
- 13. Fire Hose
- 14. Fire Streams
- 15. Fire Ground Ladders
- 16. Natural Ground Cover Fires
- 17. Hazardous Materials
- 18. Vehicle Rescue

Thank you for your interest in the Minooka Fire Protection District Cadet program. Please provide the required documents below. Once you have completed this application in its entirety, please bring it to Minooka Fire Protection District Station 1 located at 7901 East Minooka Road in Minooka, Monday - Friday between the hours of 8:00am - 4:00pm.

CHECKLIST:	P	
Application	To what willi	Recom <mark>m</mark> endation Letter
Current Grade Report	Marine of Marine	Scho <mark>ol</mark> Physical
IF APPLICABLE:	The state of the s	
Copy of Drivers License		_Copy of CPR Card
Copy of EMT		



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# **Cadet Participant Application**

The emergency information sheet, copy of driver's license and release and indemnification form must accompany this application.

Last Name	First Name	
Address		
City	StateZip	
Home Phone	Email Address	
Cell Phone	Carrier	
Date of Birth Age_	Social Security Number	
Driver's License Number	D	
School	Grade	
Employer	Years Employed	
Immediate Supervisor's Name	Work Phone	
Parent/Guardian Information Moth	er	
Fathe	er	
Other		
1. Have you ever been a member of a Fire or Police Cadet program? If so, where and when?		
2. Are you involved in any sports, clubs, or	r other activities affiliated with school?	
3. What interests you the most about becoming a member of our Fire Cadet program?		

What are your expectations for this program?	
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All applicants must be at least fifteen years old. All the information included on this application must be true and accurate. The Minooka Fire Protection District reserves the right to reject or	
accept any application for it's Cadet program.	
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Applicant Signature Date:	
Parent/Guardian Signature Date:	



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# **Cadet Program Emergency Information Sheet**

Name	
Address	
CityStateZip	
Home PhoneCell Phone	
Date of Birth	
In case of an emergency, whom shall we contact?	
Name Relationship Phone	
1.	
2.	
3.	
Medical Conditions	
Describe any medical conditions you may have:	
List any medications that you currently take or have taken in the last 3 years:	_
List any allergies:	_

Note: Certain activities throughout the Cadet Program may involve a moderate degree of physical exertion; your physician should approve of your participation.



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## **Cadet Program Release and Indemnification**

For and in consideration of my participation in the Minooka Fire Protection District (herein after "District"), (an Illinois municipal corporation), Cadet Program, I hereby agree to release, indemnify and hold the district, its officers, agents, employees and all personnel free, harmless and indemnified from any and all liability whatsoever for any injuries, damages and claims that I or Heirs, successors, assigns or agents may sustain arising out of my participation in the Cadet Program conducted by the District.

Applicant Signature ***
Print Name
Parent/Guardian
Print Name
Signed this day of, 20
Figure 1
Notary of Public Signature
Printed Name