



# Bluffton Township Fire District

## Cover Letter for Explorer Program Application

Dear Parent/Guardian and prospective Explorer:

Thank you for your interest in the Bluffton Township Fire District's Explorer Program. This packet contains information and forms that must be reviewed and completed prior to acceptance into the Explorer Program. Students must return completed admission application by \_\_\_\_\_ to be considered for admission during the \_\_\_\_\_ school year. If you have any questions about the requirements or application process please contact SFFC Shawn Fitzpatrick at 843-757-2800.

This application will help assess the level of student commitment and potential for success in pursuing a career in the Fire Service.

- Parental permission to apply to the Explorer Program is required.
- Up to twenty-five students can be admitted to a single Explorer Program.
- Students admitted into the program will be eligible to receive additional, higher level training in the Firefighter career path.
- Interested students will be selected based on program availability and approved criteria per a screening process.
- This program requires a tremendous amount of dedication and responsibility by each student.

A few of the requirements include:

- Transportation to and from our training site at 19 Ulmer Road and to training opportunities with related agencies
- Practice and mastery of skill competencies
- Strictly following all safety guidelines, and BTFD Standard Operating Guidelines and policies

### **Other Considerations:**

- Students must be 15 years of age at time program start date.
- Dress codes are enforced while attending the Explorer Program. Students must provide their own black steel-toe boots, black specified belt and white or black socks. The other uniform items will be provided by the Bluffton Fire District.
- Students must be willing to take immediate direction from the sponsoring fire department's personnel (or designated leaders) when training on or off-campus to ensure the safety of themselves and others.
- Students should be aware that any felonious criminal charges may deter a student's career opportunities in firefighter services after graduation.
- Students must adhere to the Bluffton Fire District's Code of Conduct and Substance Abuse policies as well as the Explorer Code of Conduct on and off duty.

The following checklist will assist in submitting a completed application:

\_\_\_ Student Application

\_\_\_ Student Signature

\_\_\_ Parent/Legal Guardian Signature

\_\_\_ Teacher Recommendations (minimum of 1)

\_\_\_ Guidance Councilor Recommendation *(can be provided at interview if not received by application deadline)*

\_\_\_ Copy of the Student's most current High School Transcript *(can be provided at interview if not received by application deadline)*



# Bluffton Township Fire District Explorer Application Form

For Office Use Only  
Received Date:

Submit completed application to: BTFD Training Division  
357 Fording Island Road  
Bluffton, SC 29909

## Instructions

- The signatures on page 2 indicate you have read and agree to the **"Explorer Note"** and terms set forth by the Program Administrator.
- Complete all two (2) application pages.
- If more space is needed to complete any question, please feel free to add a separate sheet of paper.
- Print clearly; incomplete and illegible applications will not be processed. Please note **"Not Applicable"** or **"N/A"** if not answering a question.
- Please visit our website [www.blufftonfd.com](http://www.blufftonfd.com) to view the position description and for more information regarding what to expect with the program.
- **Applicants will be notified via e-mail as to the status of their application.**

## Section 1: Student Name & General Information

**Last Name**                      **First Name**                      **Middle Name**

Are you willing to submit to a physical for this program?    Yes    No

Date of Birth: \_\_\_\_\_                      Current Date: \_\_\_\_\_

I am currently a:    Sophomore    Junior    Senior

E-mail Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_                      Mobile Phone: \_\_\_\_\_

**Current Mailing Address:**

Street: \_\_\_\_\_

City: \_\_\_\_\_                      State: \_\_\_\_\_                      Zip: \_\_\_\_\_

## Section 2: Student Employment History

Are you currently employed?    Yes    No

<b>Most Recent Employer</b>			
Company Name		City	State
Start Date	End Date	Job Title	
Job Duties			

## Section 3: Parent / Legal Guardian Information

Name of Parent/Legal Guardian(s): \_\_\_\_\_

E-mail Address: \_\_\_\_\_                      Contact Phone Number: \_\_\_\_\_

Current Mailing Address: Street: \_\_\_\_\_

City: \_\_\_\_\_                      State: \_\_\_\_\_                      Zip: \_\_\_\_\_

**Section 4: History**

List any special recognition or awards that you have received within the past two years.

Please list your **past** involvement in any extra activities (clubs, sports, etc.)

Please list your **current** involvement in any extra activities (clubs, sports, etc.)

*Please make note of any activities you may be involved with during the Explorer Program*

**Section 3: Goals and Ambitions**

List at least three career or academic goals/interests according to priority:

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_

Briefly describe how successful completion of a Fire Fighter program can assist you in relation to your long term goals?

**Section 7: Certification and Release**

**Explorer Note**

This application form is intended for use in evaluating your qualifications for the Explorer program; it is not a contract. Please answer all appropriate questions completely and accurately. False or misleading statements during the interview and on this application are grounds for terminating the application process or, if discovered after acceptance, termination. All qualified applicants will receive consideration without discrimination because of sex, marital status, race, color, age, creed, national origin, sexual orientation, military reserve memberships, ancestry, religion, height, weight, use of a guide or support animal because of blindness, deafness or physical handicap, or the presence of disabilities. Additional testing of job-related skills and for the presence of drugs in your body may be required prior to acceptance. After acceptance into the program, and prior to reporting for training, you may be required to submit to medical review. As a Explorer you may be required to be examined by a medical professional designated by the Bluffton Township Fire District.

By signing this application, the student and parent have read the cover letter, Explorer Note, and acknowledge the requirements necessary for successful completion of the Explorer Program.

\_\_\_\_\_  
**Student Applicant Signature & Date**

\_\_\_\_\_  
**Parent/Legal Guardian Applicant Signature & Date**