

Bluffton Township Fire District

Cover Letter for Explorer Program Application

Dear Parent/Guardian and prospective Explorer:

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Thank you for your interest in the Bluffton Township Fire Distr	ict's Explorer Program. This packet contains
information and forms that must be reviewed and completed pri	or 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 al	out the requirements or application process please
contact FF Matthew Wallett or Lt. Tyler Marion at 843-757-280	0.
This application will help assess the level of student commitment the Fire Service.	nt and potential for success in pursuing a career in

- 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	Section 1: Student N	ame & General Information	n
have read and agree to the "Explorer Note" and terms set forth by the Program Administrator.			
• Complete all two (2) application pages.	Last Name	First Name	Middle Name
• If more space is needed to complete any question, please feel free to add a separate sheet of paper.	Are you willing to submit to a physical for this program? Oyes Ono Date of Birth: Current Date:		
 Print clearly; incomplete and illegible applications will not be processed. Please note "Not Applicable" or "N/A" if not answering a question. 	I am currently a: ☐ Sophomore ☐ Junior ☐ Senior E-mail Address:		
 Please visit our website www.blufftonfd.com to view the position description and for more information regarding what to expect with the program. 	Home Phone: Current Mailing Address: Street:		
• Applicants will be notified vertical e-mail as to the status of their application.	City:	State:	_ Zip:
	Section 2: Student Employment Histo	ory	
Are you currently employed?	Yes No		
Most Recent Employer			
	Company Name	City	State
Start Date End Date	Joh	o Title	
	Job Duties		
	Section 3: Parent / Legal Guardian Inform	mation	
Name of Parent/Legal Guardian(s):			
E-mail Address:	Contact Pho	one Number:	
Current Mailing Address	Street:		
	City:		

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:
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, 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 fo 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