**CADET APPLICATION FOR MEMBERSHIP 2018**

**NAME:** Click here to enter text.

**ADDRESS:** Click here to enter text.

**CITY:** Click here to enter text. **STATE:** Click here to enter text. **ZIP CODE:** Click here to enter text.

**HOME PHONE:** Click here to enter text. **CELL PHONE:** Click here to enter text. **CARRIER:** Click here to enter text.

**EMAIL ADDRESS:** Click here to enter text.

**SCHOOL CURRENTLY ATTENDING:** Click here to enter text. **GRADE:** Click here to enter text.

**EMPLOYED BY:** Click here to enter text. **HOW LONG?** Click here to enter text.

**DL #:** Click here to enter text. **STATE:** Click here to enter text. **ISSUE:** Click here to enter text.

**EXP:** Click here to enter text. **CLASS:** Click here to enter text.

**\*Attached to this form, you must include an essay on why you want to join the cadet program.\***

**By signing below, I consent to Aiken Rescue USING this information in determining my suitability for membership. If accepted, I agree to abide by all SOPs and understand that failure to do so may result in my membership being terminated. I UNDERSTAND THAT I MUST PUT IN 12 HOURS OF VOLUNTEER SERVICE EACH MONTH TO REMAIN A MEMBER.**

**APPLICANT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_**

**If under the age of 17 you must get a parent or legal guardian’s signature giving you permission to apply.**

**PARENT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PARENT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_**

**FOR OFFICE USE ONLY**

INTERVIEW DATE \_\_\_\_\_\_\_\_\_\_ IC \_\_\_\_\_\_\_\_ ADDED TO: FLEET \_\_\_\_\_\_\_\_\_\_

HIRE DATE \_\_\_\_\_\_\_\_\_\_ ESCHEDULE \_\_\_\_\_\_\_\_\_\_

CIS VERIFIED \_\_\_\_\_\_\_\_\_\_ ESO \_\_\_\_\_\_\_\_\_\_