

BROWNSVILLE AMBULANCE CADET PROGRAM APPLICATION

OVERVIEW

The Brownsville Ambulance Cadet Program is a six-day summer program designed to provide an immersive, structured experience for young adults ages 14–17 who are interested in emergency medicine, healthcare careers, or gaining firsthand exposure to pre-hospital emergency services.

ELIGIBILITY REQUIREMENTS

- Applicants must be between the ages of 14 and 17 at the time of the program.
- Applicants must reside within the Brownsville, California, or East Beth School Districts.
- A completed application form is required.
- Applicants must submit two letters of reference from non-family members (e.g., teachers, school administrators, or volunteer supervisors).
- Full attendance for all six program days is mandatory.
- A minimum cumulative GPA of 2.0 is required.
- Enrollment is limited to 24 participants.

PROGRAM SCHEDULE

The program will take place from June 22 through June 27, from 8:00 a.m. to 4:00 p.m.

A skills demonstration and graduation ceremony will be held on June 27.

APPLICATION PROCESS

Applications will be accepted from March 1 through March 28.

Qualified applicants will receive interview questions via email. Interviews will be conducted during the evenings between April 7 and April 18 at Brownsville Ambulance Service, located at 12 Arch Street, Brownsville, PA.

Accepted applicants will receive a welcome packet via email, which will include Required forms that MUST be completed and returned PRIOR to the start of the program.

All applications and supporting documentation must be submitted electronically to cadets@brownsvilleems.org or in person at 12 Arch Street, Brownsville PA 15417

PROGRAM BENEFITS

Hands-on Experience: Practical exposure to emergency medical services and healthcare operations.

Skill Development: Strengthening teamwork, communication, leadership, and problem-solving skills.

Career Exploration: Insight into career pathways within emergency medicine and healthcare fields.

Networking Opportunities: Interaction with experienced professionals and like-minded peers.

Certification: Participants will receive a certificate of completion suitable for inclusion in resumes and college applications.

BROWNSVILLE AMBULANCE YOUTH CADET PROGRAM APPLICATION FORM

Applicant Name: _____

Date of Birth: _____ Age: _____

Home Address: _____

Phone Number: _____

Date of Application: _____

Current School GPA: _____

Short Introduction (attach additional pages if necessary):

Shirt Size: _____

Medical or Food Allergies (if any):

Two non-family reference letters must be submitted with this application.

Applicants and their families are responsible for providing transportation to and from Brownsville Ambulance Service during the program dates of June 22 through June 27.

Program sessions will be held Monday through Friday from 8:00 a.m. to 4:00 p.m. Strict adherence to attendance requirements, safety policies, and learning objectives is mandatory.

Submission of this application does not constitute acceptance into the program. Eight applicants will be selected from each of the three participating school districts.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Contact Number: _____

Applications may be submitted via email to cadets@brownsvilleems.org or in person at:

Brownsville Ambulance Service Inc.

12 Arch Street

Brownsville, PA 15417