



WELCOME RECRUIT

We are pleased you chose to join the Future First Responders of America!



The following pages is the application package for you and your parents to fill out. Below you will find how the application process goes and what you need to do next.

INSTRUCTIONS:

1. You can download the application and fill in on the computer the print it out, or print it out and hand fill it in.
2. The application package which should be 6 pages for the application, 1 page for the leadership check off list. This instruction page does not need to be returned.
3. Parents must sign the places where it calls for a parent's signature and you must sign on the section for a Cadets signature,
4. On page 3 of 5, is the Notary Public page. The parent must have this notarized that they have read and signed the application. **NOTE:** There is a notary public at all Unit meetings that will do this for free.
5. There are 2 ways to send the application in.
 - a. You can email it to LEOCode4Info@gmail.com,
 - b. you can mail it to the corporate office at P.O. Box 415, Snowflake, AZ 85937.
6. Your Unit meetings will be on the same day each month at a predetermined location.
7. Once your application has been turned in, you will be scheduled for an interview by our leadership panel and will be considered a "Recruit."
8. You may attend all meetings and training sessions. However, Regional Trainings are for vetted recruits and cadets only. To find out if you are vetted or not, please ask your local Unit Director.
9. Your application should take no more than 2 weeks for you to hear from the application committee as to your acceptance or not and will be notified by email to your parent/guardian's address.
10. If you are not accepted, the committee has decided that you may not be a good fit for the Unit, you are not granted an appeal. However, you can write in to the application committee and request a reason for not being accepted. You will have to wait 1 year to re-apply should you not be accepted.
11. If you are accepted, the next steps are as follows:
 - a. You will be notified by mail or email to your parent/guardians address
 - b. The Unit Director issue you a recruit T-shirt which must be worn to any and all Unit meetings and/or trainings. The Director will issue you that shirt at your very next meeting after acceptance.
12. From this point until you go through Academy, you are considered a "Recruit." You are bound by all the rules, policies and procedures as any regular Cadet. This includes behavior at FFROA events as well as at school and at home.
13. Once you are vetted or accepted, you can attend Regional training sessions which are approximately in the middle of the month.
14. Recruits can start accumulating "Service Hours" and that starts immediately after acceptance. All events, meetings and trainings you attend count as service hours.
15. Recruit Academy is normally twice a year in the Spring and Fall. You will be notified as to the dates, times and locations of Academy. Please note that due to the number of recruits going through Academy at any one time can change the Spring and Fall dates and could be rescheduled.
16. After you attend Academy, your graduation will be announced and your family and friends can attend your swearing in ceremony. Swear in is done by your Units local magistrate.
17. After your graduation, you are eligible to earn rank. Please note: the rank committee is informed of all your activities, service hours and behaviors when determining if a Cadet will earn his/her next rank. It is not uncommon for a Recruit to earn rank shortly after graduation depending on the Recruit.

APPLICATION CHECK LIST

- Page 1 through 5 of the FFROA Application Page 1 of the Media Release Form Email, U.S. Post Mail or Bring it



F.F.R.O.A. YOUTH APPLICATION



Date of application:	Received by:	Unit #
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Recruit Information

First name:		Middle:		Last name:	
Physical address:			City:	State:	Zip:
Mailing address:			City:	State:	Zip:
Home phone:	Cell phone:		Message phone:		
Email address:			2nd email:		
Date of birth:		School name:		Grade:	
Graduated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If so, date:	Year	GPA
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Ethnic background:		

Parent/Guardian Information

Relationship	<input type="checkbox"/> Parent	<input type="checkbox"/> Grandparent	<input type="checkbox"/> Guardian	<input type="checkbox"/> Other (Specify)
Primary	First name:		Last name:	
Secondary	First name:		Last name:	
Physical Address:		City:	State:	Zip:
Mailing Address:		City:	State:	Zip:
Home phone:	Cell phone:		Work:	
Email address primary:		Email address 2nd:		

Emergency Contact & Medical Information

Emergency contact name:			Relationship?		
Physical Address:		City:	State:	Zip:	
Home phone:	Cell phone:		Message phone:		
Are there any allergies or medical issues we need to know about?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
List any issues:					
A Prospect/Recruit/Cadet must be physically able to complete physical activities, can your applicant participate?					
<input type="checkbox"/> Yes	<input type="checkbox"/> No	With the following restrictions:			

General Information

How did you hear about us?		<input type="checkbox"/> Flyer	<input type="checkbox"/> Radio	<input type="checkbox"/> Newspaper	<input type="checkbox"/> Friend (name)
What type of First Responders are you interested in (check all that apply)					
<input type="checkbox"/> Firefighter	<input type="checkbox"/> Law Enforcement		<input type="checkbox"/> Security		
<input type="checkbox"/> Paramedic/EMT/EMS	<input type="checkbox"/> Corrections		<input type="checkbox"/> Drone/Heli/Plane Pilot		
<input type="checkbox"/> Search and Rescue	<input type="checkbox"/> 911 Dispatcher		<input type="checkbox"/> Military		
<input type="checkbox"/> Animal Control	<input type="checkbox"/> Crime Scene Investigations		<input type="checkbox"/> Lifeguard		
<input type="checkbox"/> Game & Fish	<input type="checkbox"/> K9		<input type="checkbox"/> HAM Radio Operator		
<input type="checkbox"/> U.S. Forestry Service	<input type="checkbox"/> Internet Security		<input type="checkbox"/> FEMA/CERT		
<input type="checkbox"/> Emergency Medicine	<input type="checkbox"/> Code Enforcement		<input type="checkbox"/> Emergency Preparedness		
<input type="checkbox"/> Mental Health Emergency	<input type="checkbox"/> Crisis Negotiation		<input type="checkbox"/> Trauma Response		



APPLICANT SIGNATURE STATEMENT

I hereby certify that all the statements in this application are true and correct. I further agree and understand that any misstatements or omissions of material facts herein can be cause forfeiture on my part of all rights as a member of any program, committee or group under LEOCode4 which could resolve in immediate dismissal.

Applicant Signature

Applicant Print name

Date

PARENT ACKNOWLEDGEMENT SIGNATURE STATEMENT

I am the primary caregiver for my child who is applying for this program. I hereby give my permission for my child to take part in the activities with Future First Responders of America (a subsidiary of LEOCode4, Inc.) . The information herein will be held and kept private and proprietary to LEOCode4 for use by the organization only. At no time will any information be shared, sold or given to any other company or organization as set forth by the privacy act of the United States. I give permission for my child's photograph, video, audio and/or likeness taken during the applicant, recruit and membership period for organizational promotional purposes only or as print material displays for recruiting, public awareness, press releases, public service announcements and/or public safety education. I further give the organization permission for emergency medical attention in case of emergency. I understand that LEOCode4 or its affiliates cannot take responsibility if your child does not abide by and stay within the safety rules. In addition, I hold harmless LEOCode4 and the Future First Responders program of any liability for injury, theft or loss of any kind. I understand the participation in this program can incur minor injuries but I am fully responsible for the medical needs of the child. Last, I understand that my child can be terminated and or placed on a progression disciplinary action plan should an unwarranted behavior arise. I give this organization permission for my child's emergency contact information to be used and forwarded to any emergency facility for parent/guardian contact.

Parent Signature

Parent printed name

Date



CADET COMMITMENT STATEMENT

By signing the commitment statement, I agree to the standards and expectations required to participate in the FFROA activities, functions, trainings, field trips and events. I will attend the monthly meetings for FFROA, and any specialty meetings, trainings, public events, fundraisers or events as requested. My parent/guardian will notify the unit leader, in advance, if I am unable to attend due to a planned or unplanned emergency. If there are 3 or more unapproved absences with a combination of scheduled meetings or events without notification, I may be placed on an administrative progressive disciplinary action plan for improvement and may not be able to participate in organization activities depending on the severity of the disciplinary action.

I will attend meetings in the uniform of the day with a tidy appearance, on time and ready to proceed, at the time and date as scheduled by the unit leaders. I will bring any forms, documents, training materials or equipment as requested for the specified meeting.

I will remember, at all times, that I represent the Future First Responders of America and its parent company LEOCode4, Inc 501(c)(3) organization. I understand that both in and out of uniform, that I will present myself in a respectable manner to those in authority, my parents/guardians and to my peers. If at any time I violate these positive expectations of my behavior, I may be placed on a progressive disciplinary action plan to improve my behavior and may not be able to participate in activities until improvement has been shown. In addition, depending on the severity of the violation, I could possibly be suspended, or removed from the unit immediately. At all times and especially while in a public environment or hosted event, there will absolutely no horseplay, foul language, verbal abuse or actions that could possibly have us removed from the

location due to a violation of the facilities policies/rules. I will not go into places that are out of bounds or that approval has not been given.

All prospects, recruits and cadets will behave in a paramilitary type, professional behavior at all times and will address any superiors with their rank and respect as such.

I also agree that any use of street drugs, violence, violation of any laws, arrests, school suspensions or any abuse (verbal or physical) of any kind is grounds for immediate dismissal without any warning.

By signing this statement, I have read, understand and agree to the above rules.

Applicant Signature

Printed Name

Date



CADETS PARENT/GUARDIAN COMMITMENT STATEMENT

By signing the commitment statement, I agree to the standards and expectations required to participate in the FFROA activities, functions, trainings, field trips and events. I will assist my child to attend the monthly meetings for FFROA, and any specialty meetings, trainings, public events, fundraisers or events as requested. I agree to aid them to participate in the scheduled public events. I will notify the unit leader, in advance, if I am unable to attend due to a planned or unplanned emergency. If there are 3 or more unapproved absences with a combination of scheduled meetings or events without notification, I may be placed on an administrative progressive disciplinary action plan for improvement and may not be able to participate in organization activities depending on the severity of the disciplinary action.

I will assure my child will attend meetings in the uniform of the day with a tidy appearance, on time and ready to proceed, at the time and date as scheduled by the unit leaders. I will bring any forms, documents, training materials or equipment as requested for the specified meeting. I understand that this organization will need my assistance in order to make my child's experience a success, and I may be asked to help chaperone, transport, or assist during meetings and/or events. I also understand that my participation and support is always welcomed, and that I have the right, and am encouraged to be present during any FFROA function.

I understand, at all times, that my child represents the Future First Responders of America program, its parent company LEOCode4, Inc 501(c)(3) organization and all affiliates, sponsors and supporters thereof. I understand that both in and out of uniform, that my child will present themselves in a respectable manner to those in authority, you the parents/guardians and to their peers. If at any time they violate these positive expectations of my behavior, they may be placed on a progressive disciplinary action plan to improve their behavior and may not be able to participate in activities until improvement has been shown. In addition, depending on the severity of the violation, they could possibly be suspended, or removed from the unit immediately. At all times and especially while in a public environment or hosted event, there will absolutely no horseplay, foul language, verbal abuse or actions that could possibly have the organization removed from the location due to a violation of the facilities policies/rules. They will not go into places that are out of bounds or that approval has not been given. If there are any questions about policies/rules, please ask or alert the unit leaders immediately. If discipline is required due to an action of your child, I understand that the decisions of the unit leaders and/or executive board will be applied and adhered to per LEOCode4/FFROA policies and procedures.

All prospects, recruits and cadets will behave in a paramilitary type, professional behavior at all times and will address any superiors with their rank and respect as such. I also agree that any use of street drugs, violence, violation of any laws, arrests, school suspensions or any abuse (verbal or physical) of any kind is grounds for immediate dismissal without any warning.

By signing this statement, I have read, understand and agree to the above rules.

Applicant Signature

Printed Name

Date



MEDIA RELEASE FORM

I _____, grant permission to LEOCode4 and its subsidiaries herein after known as the "Media" to use my image (photographs, videos and audio) for use in Media Publications including:

(Check all that apply. By checking none it is assumed you agree with all)

- | | |
|--|---|
| <input type="checkbox"/> ALL CATEGORIES | <input type="checkbox"/> Any Print Media |
| <input type="checkbox"/> Photographs | <input type="checkbox"/> Newsletters |
| <input type="checkbox"/> Videos and/or Audio | <input type="checkbox"/> Magazines |
| <input type="checkbox"/> Emails | <input type="checkbox"/> General Publications |
| <input type="checkbox"/> Brochures and/or Literature | <input type="checkbox"/> Digital Media |
| <input type="checkbox"/> Websites and/or Social Media (Affiliates) | <input type="checkbox"/> Other _____ |

I hereby waive any right to inspect or approve the finished photographs or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I wait any right to royalties or other compensation arising from or related to the use of the image.

Please initial the paragraph below which is applicable to your present situation

(initial) _____ I am 20 years of age or older and I am competent to contract in my own name. I have read this release before signing below, and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

(initial) _____ I am the parent or legal guardian of the below names child. I have read this release before signing below, and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

Acknowledgment Below:

Signature

Date

Print Name

Email Address

Address

City, State, Zip

Parent or Legal Guardian Signature
(If under 20 years of age)

Telephone