

Marlow Volunteer Fire Department Explorer Application

Please Print using Black or Blue Ink.

Name _____ Phone Number _____
Address _____ Birthdate _____
Email Address _____

Do you have your parent's permission to apply to be an Explorer? Yes No

Parent/Guardian Name _____ Phone Number _____
Address _____

Emergency Contacts

Name _____ Phone Number _____
Name _____ Phone Number _____

Medical Information

Doctor _____ Phone Number _____
Hospital _____ Phone Number _____

Medical Conditions _____

Allergies _____

Do you take any medication? Yes No If Yes, list the medication and what condition it is for:

Education *(Expected to maintain a 2.0 or better GPA on a 4.0 scale)*

Name of School Attending _____

Overall GPA _____ Most Recent Term GPA _____

Background Information *(use another sheet of paper if more space needed)*

(A background check will be done)

Have you ever been arrested, ticketed, fined, etc? (Felonies, Traffic Tickets, Misdemeanors, etc)

Yes No

If Yes, Please list the date(s) and what the charge(s) were/was:

Additional Information *(use another sheet of paper if more space needed)*

What interests you the most about becoming involved with the Marlow Volunteer Fire Department?

Please list other activities, in detail, that you are involved in (sports, volunteer work, church, etc):

Applicant Signature and Date

Parent Signature and Date

Fire Chief Signature and Date

Parental Consent

My son/daughter, _____, has my permission to be an Explorer with the Marlow Volunteer Fire Department. I give my consent to allow _____ to be an Explorer and do not hold the Marlow Volunteer Fire Department responsible for any actions caused by my son/daughter that is not under the direction of an Officer.

Explorer Signature and Date

Parent/Guardian Signature and Date

Contract of Understanding

I and my son/daughter have read the Explorer Program Standard Operating Guidelines and understand the guidelines set up to outline the purpose of the Explorer Program. I and my son/daughter understand that Explorer Firefighters serve as supporters of the Marlow Volunteer Firefighters to learn the basics of firefighting and to prepare to become a full member at the age of 18. I and my son/daughter understand that Explorer Firefighters are to follow all instructions from members of the Marlow Volunteer Fire Department and that the general standard of conduct is to act in the manner of a professional. I and my son/daughter understand that he/she is expected to be courteous and respectful of other members (Explorer and Regular) and to all citizens as they are representing the Marlow Volunteer Fire Department. I and my son/daughter understand there is a “zero tolerance” policy regarding drug and alcohol use. I and my son/daughter understand that by signing this Contract of Understanding we are declaring that any violation of the guidelines is grounds for immediate dismissal. I and my son/daughter understand that any acts that violate the guidelines and that are illegal by state law will be referred to the Anderson County Sheriff’s Department.

The Marlow Volunteer Fire Department provides primary liability insurance coverage against all personal liability arising from official Explorer Program activities.

Explorer Signature and Date

Parent/Guardian Signature and Date

Acknowledge Receipt of Guidelines

I acknowledge that I and my son/daughter have received a copy of the Marlow Volunteer Fire Department Explorer Program Standard Operating Guidelines and have reviewed them prior to signing these documents.

Explorer Signature and Date

Parent/Guardian Signature and Date

I acknowledge that the above received a copy of the Marlow Volunteer Fire Department Explorer Program Standard Operating Guidelines.

Fire Chief Signature and Date