



Winters Fire Department

700 Main St, Winters CA 95694 | Office (530) 795-4131 | Fax (530) 795-5434

FIRE EXPLORER PROGRAM APPLICATION

GENERAL MEMBERSHIP REQUIREMENTS:

- Participants must be between 14 to 18 years of age (participants between the ages of 14 and 17 must have parental permission).
- Participants must be enrolled in school with a minimum of a 2.0 GPA through 12th grade.
- School transcripts must be enclosed with the application. Proof of grades will be required to be presented to the Fire Explorer Coordinator quarterly.
- Successfully pass a background investigation, including, but not limited to: Criminal history check, DMV history check, and contact with listed references.
- Within four weeks of acceptance, Fire Explorers will be provided with a Winters Fire Department Fire Explorer Uniform. Uniforms will only be worn while performing Fire Explorer duties and remain the property of Winters upon participant's completion of or release from the Fire Explorer Program.
- If, at any time, Fire Explorer is not able to meet the requirements of the program, they shall contact the Fire Explorer Coordinator to discuss further participation.

All of the above requirements are taken into consideration when considering an applicant. None of the above are intended to be an automatic disqualifier. If special circumstances exist that should be considered during the application period, contact the Fire Explorer Coordinator.

APPLICATION REQUIREMENTS:

- All lines must be completed. If an item does not apply, indicate "not applicable" (N/A)
- Give complete information, including first, middle, and last names
- Sign the forms in the appropriate places. If you are under the age of eighteen (18), your parent/guardian must sign the application and any other required forms as a condition of your participation.
- Intentional withholding of information or falsification of information on this application will result in immediate denial of acceptance. If the applicant is accepted and falsification is discovered, the Fire Explorer will be dismissed without recourse and may be disqualified from any future participation.
- Applications may be submitted in person or mailed to: Winters Fire Department, Attn: Fire Explorer Program 700 Main St Winters, CA 95694
- Once your application is received, you will be contacted for an interview date.



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AGREEMENT ASSUMING RISK OF INJURY OR DAMAGE WAIVER AND RELEASE OF CLAIMS/LIABILITY

I hereby completely acknowledge, comprehend and agree to the following in consideration for authorization to participate in the Fire Explorer Program with the Winters Fire Department. I am fully aware of and understand the nature of the work and activities of said Department are inherently dangerous involving risk of injury, damage or loss to person and property.

I acknowledge I may be subjected and exposed to the risk of death, great physical bodily injury, mental/emotional/psychological trauma, post-traumatic stress disorder, or property damage during the program. I further understand that hazardous conditions and unusual circumstances may arise including (but not limited to): exposure to the use of non-lethal and lethal weapons, acts of violence, violent subjects, unlawful acts, assaults, riots, disturbances or the peace, fires, explosions, radiation, electrocution, chemical exposure, potentially harmful biological exposure, natural disasters, nuclear disasters, unforeseen variables and occurrences, and acts of war.

I have read and understand the following provisions of California Vehicle Code Section 17158: No person riding in or occupying a vehicle owned by them and driven by another person with their permission and no person who as a guest accepts a ride in any vehicle upon a highway without giving compensation for such ride, nor any other person, has any right of action for civil damages against the driver of the vehicle or against any other person legally liable for the conduct of the driver on account of personal injury to or the death of the owner or guest during the ride; unless the plaintiff in any such action establishes that the injury or death proximately resulted from the intoxication or willful misconduct of the driver.

I understand that while occupying a vehicle of the Winters Fire Department, that my status is that of a guest. My right for civil damages against the driver of the said vehicle or any other person legally liable for the conduct of the driver, for death, personal injury, or property damages is that of provided by California Vehicle code Section 17158.

Furthermore, I hereby agree that myself, my heirs, executors, and any other administrators or assigns will defend, indemnify, and completely release and hold harmless of any and all loss, liability, and responsibility, the Winters Fire Department, the Fire Chief, Firefighters, Department employees or agents of any and all manner of actions, suits, claims, debts, demands, damages, or liability or expense of any and every kind and nature incurred or arising by reason of any actual or claimed negligence or wrongful act or omission of mine while participating in the Winters Fire Department Fire Explorer Program.

I have carefully read, completely agree with and understand this document. This document is binding in accordance with the laws of the State of California

******* READ THIS DOCUMENT COMPLETELY BEFORE SIGNING *******

FIRE EXPLORER APPLICANT

_____	_____	_____
PRINT NAME	SIGNATURE	DATE

PARENT/GUARDIAN

_____	_____	_____
PRINT NAME	SIGNATURE	DATE



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APPLICANT INFORMATION

Complete Name	
Date of Birth	
Address	
Email	
Phone	

EMERGENCY CONTACT

Complete Name	
Address	
Phone	
Relationship	

EMPLOYMENT

Are you employed?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Work Location	
Phone	
Average number of hours per week	

PARENT/GUARDIAN

Same as Emergency Contact Information above

Complete Name	
Address	
Phone	
Relationship	

DRIVING RECORD

Do you have a license?	<input type="checkbox"/> No <input type="checkbox"/> Yes	Driver's License Number	
Traffic Violations	<input type="checkbox"/> No <input type="checkbox"/> Yes		
If yes, please list			

CRIMINAL RECORD

Arrested for crime?	<input type="checkbox"/> No <input type="checkbox"/> Yes	Date of Arrest	
Convicted of crime?	<input type="checkbox"/> No <input type="checkbox"/> Yes	Date of Conviction	
Have you ever used illegal drugs?	<input type="checkbox"/> No <input type="checkbox"/> Yes		
If yes to any of the above, please list			

SCHOOL

Name of Current School			
GPA for last completed quarter/semester			
Have you ever been suspended from school?	<input type="checkbox"/> No <input type="checkbox"/> Yes	Have you ever been expelled from school?	<input type="checkbox"/> No <input type="checkbox"/> Yes
If yes to any of the above, please list date and describe the circumstances			



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INTERESTS/TRAINING What are your career interests?

Previous training, skills, and experience? _____

REFERENCES (All applicants must provide 2 letters of recommendation)

REFERENCE 1

Complete Name	
Address	
Phone	
Relationship	

REFERENCE 2

Complete Name	
Address	
Phone	
Relationship	

I hereby apply for the position of Fire Explorer at the Winters Fire Department. I further consent and authorize a representative from the department to conduct a background investigation, including, but not limited to, a juvenile and criminal history records check, driver's license history check from the Department of Motor Vehicles, and contact with the listed references.

FIRE EXPLORER APPLICANT

_____	_____	_____
PRINT NAME	SIGNATURE	DATE

PARENT/GUARDIAN (if Cadet Applicant is under the age of 18)

_____	_____	_____
PRINT NAME	SIGNATURE	DATE