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## *Palatine Fire Department*

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Fire Chief Scott Mackeben  
1475 N. Hicks Rd • Palatine, IL 60074

Phone: (847) 202-6340

Fax: (847) 202-6320  
[www.Palatine.IL.US](http://www.Palatine.IL.US)

# Fire Explorer Program Application

## DESCRIPTION

The Palatine Fire Department (PFD) Fire Explorer Program offers a career-focused learning opportunity for young adults interested in pursuing careers in firefighting and/or emergency medical services (EMS). The educational program includes both classroom and practical hands-on exercises presented by active Firefighters/Paramedics sharing real-world knowledge and experience.

PFD Fire Explorers regularly meet on the 2<sup>nd</sup> & 4<sup>th</sup> Tuesdays in the evening and 3<sup>rd</sup> Saturday of every month. Explorers must attend at least 70% of the exercises to remain active members of the program.

## PURPOSE

The primary purpose of the PFD Fire Explorer Program is to introduce young adults to the rigors and challenges of the Fire and EMS service to prepare those interested in pursuing a career in an emergency services field.

## AGE REQUIREMENTS

Applicants must be between 14 and 18 years old and enrolled in high school.

## PROGRAM ACCEPTANCE PRIORITY

1. Palatine residents.
2. Non-Palatine residents who attend Palatine or Fremd High Schools.
3. Residents of Rolling Meadows or Inverness.
4. Residents within Harper College District 512 boundaries.
5. All other applicants.

## APPLICATION SUBMISSION

Completed applications can be mailed to the Palatine Fire Department, Station 85, 39 East Colfax Street, Palatine, IL 60067, hand-delivered Monday through Friday from 8 a.m. to 5 p.m. or emailed to: [PalatineFDexplorers@palatine.il.us](mailto:PalatineFDexplorers@palatine.il.us)

**PERSONAL INFORMATION**

Name: \_\_\_\_\_  
First MI Last

Address: \_\_\_\_\_  
Number & Street City State Zip Code

Phone: (\_\_\_\_\_) \_\_\_\_\_ ☐ Mobile/Cell ☐ Home

Email: \_\_\_\_\_

Check one (1) of the following: I am a...

- |   |   |
|---|---|
| <input type="checkbox"/> Palatine resident  | <input type="checkbox"/> Resident within Harper College District 512 boundaries |
| <input type="checkbox"/> Non-Palatine resident attending Palatine or Fremd High Schools | <input type="checkbox"/> Other _____  |
| <input type="checkbox"/> Resident of Rolling Meadows or Inverness                       |   |

**EDUCATION**

*Applicants shall be high school students between the ages of 14 and 18.*

Are you currently enrolled in High School? ☐ Yes ☐ No

High School Name: \_\_\_\_\_

Current year in High School: ☐ Freshman (Grade 9) ☐ Sophomore (Grade 10)  
☐ Junior (Grade 11) ☐ Senior (Grade 12)

Are you planning on attending Harper College after high school? ☐ Yes ☐ No

Are you participating in the Harper Promise Scholarship program? ☐ Yes ☐ No

Do you possess a valid Driver's License? ☐ Yes ☐ No

DL Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_



## EMPLOYMENT HISTORY

Employment Status (check one):

☐ Currently Employed      ☐ Formerly Employed      ☐ Never Employed

Current/Most Recent Employer: \_\_\_\_\_

Location: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Supervisor's Title: \_\_\_\_\_

## REFERENCES

List at least two (2) adults (non-relative) that you have known for a minimum of one (1) year who can attest to your integrity, ethics, and character.

(No. 1) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ How long have you known them: \_\_\_\_\_

(No. 2) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ How long have you known them: \_\_\_\_\_

## COMMUNITY SERVICE

Do you volunteer in any community service programs? ☐ Yes ☐ No

If yes, describe: \_\_\_\_\_

*(Additional information can be included on Page 6 of this application)*

**EXTRACURRICULAR ACTIVITIES**

Please list any extracurricular activities (e.g., sports, clubs, band, etc.) that may affect your attendance in the Fire Explorer Program. *(Additional information can be included on Page 6 of this application)*

**Activity #1:** \_\_\_\_\_ **Organization:** \_\_\_\_\_

**Season:** \_\_\_\_\_ **Coach/Advisor Name:** \_\_\_\_\_

**Phone Number:** (\_\_\_\_) \_\_\_\_\_ **Email:** \_\_\_\_\_

**Activity #2:** \_\_\_\_\_ **Organization:** \_\_\_\_\_

**Season:** \_\_\_\_\_ **Coach/Advisor Name:** \_\_\_\_\_

**Phone Number:** (\_\_\_\_) \_\_\_\_\_ **Email:** \_\_\_\_\_

**Activity #3:** \_\_\_\_\_ **Organization:** \_\_\_\_\_

**Season:** \_\_\_\_\_ **Coach/Advisor Name:** \_\_\_\_\_

**Phone Number:** (\_\_\_\_) \_\_\_\_\_ **Email:** \_\_\_\_\_

**PERSONAL STATEMENT**

Attach a typed, 100-150 word statement on why you want to be a PFD Fire Explorer.

**Personal Statement Attached to Application:** ☐ Yes

**LETTER OF RECOMMENDATION**

Attach a letter of recommendation from an adult (non-relative) that you have known for a minimum of one (1) year. This letter is intended to attest to your character and why you are a quality candidate for the PFD Fire Explorer Program. This letter may be from one of your personal references.

**Letter of Recommendation Attached to Application:** ☐ Yes

**EMERGENCY CONTACT INFORMATION**

Provide information of a parent/guardian that can be contacted in the event of an emergency.

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

**CERTIFICATION & GUARDIAN CONSENT**

This program provides PFD Fire Explorer applicants an entry level exposure of the fire service. Applicants will be subjected to an interview with PFD Fire Explorer Advisors as part of the selection process. The information provided in this application will be used to determine if an applicant qualifies for the program. We encourage applicants to be honest and truthful when completing the application.

**I hereby certify that all statements made in this application are true and complete. I understand that any misrepresentation of material facts may subject me to disqualification.**

Applicant: \_\_\_\_\_  
First MI Last

\_\_\_\_\_  
Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**I understand the requirements and I am allowing my child to participate in the Palatine Fire Department Explorer Program. (Sign if applicant is under 18 years old)**

Parent/Guardian: \_\_\_\_\_  
First Last

\_\_\_\_\_  
Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Use this space to provide any additional information.

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## GENERAL RIDE-ALONG RELEASE

KNOW ALL MEN BY THESE PRESENTS, that the undersigned,

\_\_\_\_\_  
Applicant's Name (printed)

\_\_\_\_\_  
Signature (parent/guardian if under 18)

Residing at \_\_\_\_\_

In the City of \_\_\_\_\_, County of \_\_\_\_\_

State of \_\_\_\_\_,

in consideration of being allowed to ride in or accompany the Village of Palatine Fire Department on Village of Palatine owned fire trucks, ambulances or other equipment to fires, medical calls or on other emergencies or errands within the course of the employment of Village of Palatine Fire Department personnel and while also being on property owned, operated, controlled or maintained by the Village of Palatine, it's assignees, agents or representatives, does hereby unconditionally release, acquit, exonerate, and forever discharge the Village of Palatine, its elected officials, employees, agents and assigns from any and all claims, liabilities, demands, accounts, sums of money, torts, trespasses, causes of action or rights of action, whether at law or in equity, which the undersigned, his/her heirs and/or assigns may have as a result of personal injury or other damage or loss of property which occurs while accompanying Village of Palatine Fire Department personnel or while on equipment and /or property described above. Nothing in this General Release waives any immunities or defenses that the Village of Palatine, its elected officials, employees, agents, or assigns may assert.

I HAVE READ THE FOREGOING TERMS OF THIS GENERAL RELEASE AND FULLY UNDERSTAND THE TERMS AND EFFECT OF THIS GENERAL RELEASE AND I INTEND FOR IT TO BE FULLY ENFORCEABLE.

**IN WITNESS THEREOF**, the undersigned has executed this instrument in the Village of Palatine, County of Cook, State of Illinois, this \_\_\_\_\_ day, of \_\_\_\_\_, 20\_\_\_\_\_.

**Witness** \_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature