

BEDFORD HILLS FIRE DEPARTMENT, INC.

**332 BEDFORD ROAD
Bedford Hills, New York 10507**



Dear Prospective Firefighter Candidate Member:

Thank you for your interest in joining the **Bedford Hills Fire Department – Firefighter Candidate Program**. We are always looking for dedicated individuals who can assist us in carrying out our mission of preventing and extinguishing fires and protecting life and property from destruction and damage by fire.

Our department is rich in history and tradition. We were established on February 4, 1903, as a volunteer fire department known as the Bedford Station Fire Department. The department was comprised of 23 charter members and a boy not old enough to appear on the active rolls. Today we are known as the Bedford Hills Fire Department and remain a 100% volunteer agency protecting the residents of the Bedford Hills Fire District.

In 2001 we created our Firefighter Candidate program to stimulate interest and train qualified youths for volunteer fire service in the Bedford Hills Fire District. Our program has served as the model for many neighboring departments to create similar programs. Since the inception of the Candidate Program, we have developed and mentored numerous youths in our community while also developing the current and future leaders of our organization.

To process your application, please ensure that the application and release forms are completed in their entirety, notarized and accompanied by the \$15.00 application fee (non-refundable). A check or money order payable to the "Bedford Hills Fire Department" is required. Completed applications should be addressed to the attention of: "Membership Investigation Committee" and can mailed to or dropped off at Bedford Hills Fire Department, 332 Bedford Road, Bedford Hills, NY 10507. Please note that incomplete applications will not be considered.

Once your completed application is reviewed and accepted, you will be contacted by the Candidate Program Advisor(s) to arrange a meeting with the applicant and their parent or guardian, the Advisor(s) and the Membership Investigation Committee. Upon acceptance by a vote of the membership of the Bedford Hills Fire Department and approval by the Bedford Hills Fire District - Board of Fire Commissioners, the Firefighter Candidate and their parent or legal guardian will be contacted to schedule an orientation session with the Advisor(s) and the Board of Chiefs.

We ask for your patience with the application process, as depending on the timing of when you submit your application, the process can take approximately two to three months.

Thank you again for your interest in joining our team and taking the time to complete our application. We look forward to meeting you at your membership interview.

Sincerely,

The Membership of the Bedford Hills Fire Department

BEDFORD HILLS FIRE DEPARTMENT

*332 Bedford Road
Bedford Hills, New York 10507
www.bedfordhillsfd.org*

FIREFIGHTER CANDIDATE PROGRAM

PURPOSE:

The purpose of the Bedford Hills Fire Department – Firefighter Candidate Program (“Candidate Program”) is to stimulate interest and train qualified youths for volunteer fire service in the Bedford Hills Fire District.

GOVERNING BODY:

The Candidate Advisory Committee (“Advisory Committee”) will work in conjunction with the Board of Chiefs, Board of Directors and Board of Fire Commissioners to govern the Candidate Program. Prior to the start of each calendar year, the Chief of Department and President of the Fire Department will appoint the Advisory Committee and the Candidate Program Advisor(s) (“Advisor(s)”) for the upcoming year. The Advisor(s) are responsible for the direct supervision of the Candidate Program and will work closely with the Board of Chiefs to coordinate all activities and drills/trainings planned for the Candidate Program. The Advisory Committee will meet quarterly to review the activities of the Candidate Program.

FUNDING:

Funding for the Candidate Program will derive from the following sources:

- Fund raising activities by the Candidate Program
- Fire Department Operating Budget
- Fire District Operating Budget

MEMBERSHIP QUALIFICATIONS:

- **Junior Firefighter Candidate - 15 Years of Age.**
- **Firefighter Candidate – 16 Years of Age.**
- Residence requirements are the same as the Bedford Hills Fire Department By-Laws for active membership.
- Written consent of the parent or legal guardian (Must be submitted with the application).
- Written confirmation from a Medical Professional (MD, DO, PA and/or APRN) as to the satisfactory physical condition of the applicant.
- A \$15.00 fee must accompany this application. (*Checks Payable to Bedford Hills Fire Department.*)

APPLICATION PROCESS:

- Submit a completed application with the application fee.
- Await contact from the Advisor(s) to arrange a meeting with the applicant and their parent or guardian, the Advisor(s) and the Membership Investigation Committee.
- A New York State Arson and Sex Offender Registry Background Check will be conducted.
- Upon acceptance by a vote of the membership of the Bedford Hills Fire Department and approval by the Bedford Hills Fire District - Board of Fire Commissioners, the Firefighter Candidate and their parent or legal guardian will be contacted to schedule an orientation session with the Advisor(s) and the Board of Chiefs.

JUNIOR FIREFIGHTER CANDIDATE PROGRAM - OPERATING GUIDELINES **(AGE 15)**

REGULATIONS:

- Junior Firefighter Candidates (“Junior Candidates”) may **NOT** under any circumstances respond to **ANY** emergencies/alarms (Fire or EMS) or emergency scenes. Junior Candidate activities are strictly limited to authorized work details, supervised drills/trainings and memorial services as approved by the Candidate Advisor(s). Junior Candidates are permitted to attend the Bedford Hills Fire Department – Annual Family Picnic if they are accompanied by a parent or legal guardian.
- Junior Candidates must strictly adhere to the Candidate Program - Operating Guidelines, the Bylaws of the Bedford Hills Fire Department, and all policies of the Bedford Hills Fire District.
- Junior Candidates will not be issued a key to any Fire Department/District facility until they transition to a Probationary Firefighter at age 17.
- Junior Candidate activities are limited to a maximum of three hours per function. Any exceptions must be pre-approved by the Board of Chiefs.
- Junior Firefighter Candidates are **NOT** allowed to be inside or outside the firehouse, on Fire District property, or at a function after 10:00 PM. If a situation arises that a Junior Candidate must be in the firehouse beyond 10 PM or outside of an official event/training, they must be accompanied by a parent/legal guardian.
- Junior Candidates are strictly prohibited from using or displaying a blue light in their own vehicle or any vehicle they may be a passenger in.
- Junior Candidates may only use the Bedford Hills Fire Department/District – Fitness Room while under the direct supervision of the Advisor(s).
- Junior Candidates are prohibited from using alcoholic beverages and controlled substances as well as tobacco and tobacco products.
- Junior Candidates must maintain a “C” average or higher. (*A signed Release Form permitting the Advisory Committee to communicate with Junior Candidate’s school on as needed basis must be submitted with the application.*)
- The parent or guardian will be copied on all communications from the Advisor(s) to the Junior Candidates while in the Candidate Program.

FIREFIGHTER CANDIDATE PROGRAM - OPERATING GUIDELINES **(AGE 16)**

FUNCTION:

- Under **NO** circumstances will a Candidate enter a burning building or respond to a Hazardous Materials Call (Haz Mat Incident).
- The primary function of the Candidate Program will be to assist with any tasks assigned by the Officer in Charge (OIC) or Member of The Bedford Hills Fire Department during or after an emergency or disaster if it is permitted by the Operating Guidelines of the Candidate Program.
- The tasks may consist of, one or more of the following, but not limited to:
 - Establishing a fire line/safety zone
 - Packing Hose
 - Restocking supplies
 - Manning a hydrant
 - Changing SCBA bottles
 - Attending training classes/drills
 - Recruit new members for the Candidate Program
 - Take an active role in Fire Prevention

REGULATIONS:

- Firefighter Candidates (“Candidates”) Candidates may not respond to emergencies/alarms (Fire or EMS) or emergency scenes until they have completed the orientation program and have received authorization to respond from the Advisor(s).
- Candidates are not allowed to ride the first due apparatus to any alarm unless permission is granted by an Officer (Chief Officer, Captain, Lieutenant or Advisor).
- Candidates are **NOT** allowed to ride apparatus to any emergencies/alarms (Fire or EMS) on Interstate 684 and the Sam Mill River Parkway, as well as Mutual Aid calls.
- Candidates may respond to emergencies/alarms at any hour of the day except for school hours. Candidates may **NOT** under any circumstances leave school to attend an alarm. (Fire Pagers may not be brought to school.)
- Candidate activities are strictly limited to authorized work details, supervised drills/trainings and memorial services as approved by the Candidate Advisor(s). Candidates are permitted to attend the Bedford Hills Fire Department – Annual Family Picnic, if they are accompanied by a parent or legal guardian.
- Candidates must strictly adhere to the Candidate Program - Operating Guidelines, the Bylaws of the Bedford Hills Fire Department, and all policies of the Bedford Hills Fire District.
- Candidates will not be issued a key to any Fire Department/District facility until they transition to a Probationary Firefighter at age 17.

- Candidate activities are limited to a maximum of three hours per function. Any exceptions must be pre-approved by the Board of Chiefs.
- Candidates are **NOT** allowed to be inside or outside the firehouse, on Fire District property, or at a function after 10:00 PM. If a situation arises that a Candidate must be in the firehouse beyond 10 PM or outside of an official event/training, they must be accompanied by a parent/legal guardian.
- Candidates are strictly prohibited from using or displaying a blue light in their own vehicle or any vehicle they may be a passenger in.
- Candidates may only use the Bedford Hills Fire Department/District – Fitness Room while under the direct supervision of the Advisor(s).
- Candidates are prohibited from using alcoholic beverages and controlled substances as well as tobacco and tobacco products.
- Candidates must maintain a “C” average or higher. *(A signed Release Form permitting the Advisory Committee to communicate with Junior Candidate’s school on as needed basis must be submitted with the application.)*
- The parent or guardian will be copied on all communications from the Advisor(s) to the Candidates while in the Candidate Program.

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APPLICATION FOR MEMBERSHIP - FIREFIGHTER CANDIDATE PROGRAM

I am applying for the following membership (Select One):

____ Junior Firefighter Candidate - 15 Years of Age

____ Firefighter Candidate – 16 Years of Age

PLEASE ENSURE THAT THE APPLICATION IS COMPLETED IN ITS ENTIRETY AND THAT ALL REPOSSES ARE LEGIBLE AND PRINTED WITH INK.

1. _____
(Last Name) (First Name) (Middle)
2. _____
(Address) (Apt./Suite No.)

(City, Town, Village) (State) (Zip Code)
3. Telephone: (____) _____ (____) _____ _____
(Home) (Cell) (E-MAIL Address)
4. How long have you resided at the above address? Years: _____ Months: _____
5. How long have you resided in New York State? Years: _____ Months: _____
6. Is additional information about a change in your name or your use of an assumed name or nickname necessary to enable a check on your eligibility for membership? Yes ___ No ___ If "Yes", explain.

7. Are you a U.S. citizen? Yes ___ No ___ If not a citizen are you a legal resident? Yes ___ No ___
8. Are you enrolled in High School? Yes ___ No ___ Name of School: _____
9. Please list any activities you are involved with at school or (clubs, sports, etc.): _____

10. Do you currently hold membership in any other community organizations? Yes ___ No ___ N/A ___
If so, please provide the names _____

11. Previous emergency services experience: (include only fire, rescue, police, and emergency medical service agencies).

Name of Agency _____

Address _____

Supervisor: _____ Phone Number: _____

(If more space is needed, please utilize the "Additional Info" section.)

12. Have you ever previously applied for membership in, or been a member of, this or any other fire department, ambulance corps, or similar organization? Yes____ No_____.

If "Yes" please list the agency and date of service or date of application in the "Additional Info" section

13. Do you have a valid New York State Drivers License? Yes____ No____ N/A____

License Number _____ License Class _____ Expiration Date _____

Restrictions _____

Has your drivers license ever been revoked or suspended? Yes____ No____

If "Yes" provide details in the "Additional Info" section.

14. Have you ever been convicted or pled guilty to a felony, misdemeanor, insurance fraud, arson, or a reduction of one of these offenses? Yes____ No____ *If "Yes" give details in "Additional Info" section.*

15. Please list three personal references, other than members of this organization, who have known you for at least 3 years.

A. Name: _____ Tel.# _____

B. Name: _____ Tel.# _____

C. Name: _____ Tel.# _____

16. Please list the names of any acquaintances that are members of this organization:

17. Upon turning age 17 and your successful transition to a Probationary Firefighter, the Bedford Hills Fire District ("Fire District") – Medical Examination Policy requires that you undergo and pass a physical examination. This examination will be paid for by the Fire District and conducted by an authorized Fire District Physician. Will you be willing to undergo this medical examination?

Yes____ No_____

EMERGENCY CONTACT INFORMATION

Emergency Contact – 1

Name _____ Relationship: _____

Street Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email: _____

Emergency Contact – 2

Name _____ Relationship: _____

Street Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email: _____

ADDITIONAL INFORMATION



I hereby affirm, under penalty of perjury, that all the information provided in this application is truthful and accurate. I understand that each statement will be investigated. Any inaccurate, falsified, or misleading statement or answer, whether by commission or omission, may result in rejection of this application or dismissal from the Bedford Hills Fire Department.

Applicant's Signature

Date of Application

Subscribed and Sworn to
Before Me, This _____ Day
Of _____, 20____.

(Notary Public)

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APPLICANT'S AUTHORIZATION FOR RELEASE OF INFORMATION

In order to confirm the information I supplied in my application for membership with the Bedford Hills Fire Department, I authorize all licensing agencies, educational institutions, law enforcement agencies, present and former employers, and the military services to disclose their relevant records about me to the Bedford Hills Fire Department whether the information be of public, private or confidential nature; and I release them from liability and responsibility from doing so.

This authorization, in original copy form, shall be valid for this and any future information, reports or updates that may be requested.

I understand that this form will accompany requests for official documents and confirmations of my credentials.

Applicant Name

Applicant's Signature

Date

Subscribed and Sworn to
Before Me, This _____ Day
Of _____, 20____.

(Notary Public)

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PARENTAL PERMISSION – FIREFIGHTER CANDIDATE PROGRAM (AGES 15 & 16)

I _____ Give my Son/Daughter _____ Permission
PARENT (PRINT NAME) APPLICANT (PRINT NAME)

to join the Bedford Hills Fire Department and participate in the Firefighter Candidate Program. I have read in its entirety and understand the *Junior Firefighter Candidate Program (Age 15)* and the *Firefighter Candidate Program (Age 16) - Standard Operating Guidelines* and reviewed them with my Son/Daughter.

I understand that as the legal guardian, it is my responsibility to inform the Advisor(s) of any academic or disciplinary issues related to the Candidate's academic performance. If for any reason a Candidate receives an academic suspension and/or expulsion, they may not participate in any firematic function during the absence. I further certify that my Son/Daughter is medically and physically fit to undertake the strenuous activities of a firefighter, and that, to my knowledge, is not suffering from any contagious or infectious disease, or any medical or dental condition of disability likely to interfere with or be aggravated by firefighting activities. I have provided a completed medical clearance form completed by a medical professional. I understand that it is my responsibility to notify the Advisor(s) of any change in medical status after submission of the form.

Lastly, I acknowledge that upon turning Age 16, my Son/Daughter will transition from a *Junior Firefighter Candidate* to a *Firefighter Candidate*, and his/her participation will be regulated by the Firefighter Candidate – Standard Operating Guidelines that include the ability to respond to emergencies/alarms (Fire or EMS) and emergency scenes. I have also read and reviewed these Standard Operating Guidelines with my Son/Daughter and allow participation.

Signature of Parent or Legal Guardian

Date

Subscribed and Sworn to
Before Me, This _____ Day
Of _____, 20____.

(Notary Public)

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MEDICAL RELEASE – FIREFIGHTER CANDIDATE PROGRAM (AGES 15 & 16)

Applicant Name (Print)

On the basis of my findings and on my knowledge of the named child, I find that: he/she is capable of performing the strenuous activities required of a firefighter without any restrictions and is free from contagious and communicable disease.

____ APPROVED

____ DENIED

____ RESTRICTED (*LIST RESTRICTIONS BELOW*)

RESTRICTIONS: _____

*****MEDICAL PROFESSIONAL (MD, DO, PA AND/OR APRN), PLEASE BE SURE TO SIGN AND STAMP THIS FORM.**

Signature of Examiner

Address

Name (Printed)

City, State, Zip

Title

(____) _____
Phone

Date