Summit Volunteer First Aid Squad Application for Junior Program

Visit us on the web: www.summitems.org/join/junior-program

Thank you for your interest in joining our Junior Program. Please remember, this program is for high school students who live in Summit and will turn 16 years of age by October 31st, 2024. **The written portion on the last page is MANDATORY.** Once you complete the application, you may submit it in three ways:

- 1) Scan and Email form to juniorapplications@summitems.org
- 2) Mail to Attn: Personnel Lieutenant, Box 234, NJ 07902-0234
- 3) Hand Deliver to 1000 Summit Ave, Summit

All applications are due March 15th, 2024. We look forward to meeting with you!

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		_Pa	ersona	al Info	rmation					
First Name N		Aiddle Name	ersonal Information Last Name			Email Address (not a school email)				
Home Address – Street			City		Zip Code		Pronouns			
Cell Phone				Cell Phone Carrier			Date of Birth			
Guardian Name				Guardian Contact Number ()				Guardian Email Address		
School										
School Telephone Current grade ()					Resume Atta	Attached (Y/N) T		Transcript Attached (Y/N)		
Have your driving privileges If yes, please explain:			lo							
Have you ever been convict If yes, please explain:				. 11						
Applicant Signature:	igning this	application, I ce	rtify th		information co al Guardian Sig			e.		
Indicate Time	es Availabl	е				First A	Aid Training			
Weekday Shifts (Weekly)	4pm-7pr	n 7pm-10pm			Cer	tificatio	on(s)		Exp. Date	
Sunday (Night only)										
Monday										
Tuesday					Related \	Work Ex	xperience		Dates	
Wednesday										
Thursday										
Friday										
Weekend Shift (Monthly)	7am-7pn	n 7pm-11pm								
Saturday										
Sunday (Day only)										
Plo	ease provi	de the names of	two	erson	s (unrelated to	you) f	or references			
Teacher/Counselor Name				0	ther Reference	Name				
Email				Er	mail					
				Ci	ity				State	
Relationship				R	elationship					
Number of Years Known				N	umber of Years	s Knowr	า			
				Te	elephone)					

Is there any other training or experience which you feel would be applicable to the first aid squad?

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Please write out your response to the following questions:

All our members are interested in serving our community. Please write about what specifically appeals to you in volunteering with our squad (Please limit your responses to 100-250 words).								