

# **Wilson Community College Regional Fire/Rescue Academy Cadet Application Packet**



Wilson Community College • Attention: Ben Smith  
902 Herring Ave • PO Box 4305 • Wilson, NC 27893

252-246-1372 • 252-291-1195

# Academy Check Sheet

All of the following must be completed and returned to be accepted into the Wilson Community College Fire/Rescue Academy.

- Completed Cadet Application Packet (*this document*), including
  - Department Affiliation Validation
  - Signed Cadet/Testing Contract
  - Notarized Academy Records Statement
- Copy of Driver's License
- Copy of High School Diploma (*or equivalent*)
- Drug Screen Results (*10-panel test*)
- Cholesterol Screening Test
- Hepatitis B Series (*first shot required by registration*)
- TB Skin Test
- Completed Medical Form (*see medical form included in application packet*)
- Criminal Background Check
- ACT WorkKeys Skill Report (*minimum level 3 in the following assessments*):
  - WorkKeys Applied Math
  - Work Keys Workplace Documents
  - WorkKeys Graphic Literacy
- The required textbooks include:
  - Jones & Bartlett: "*Fundamentals of Firefighter Skills and Hazardous Materials Response*" Fourth Edition
  - Jones & Bartlett: "*First Aid, CPR, and AED Standard*" Eighth Edition
  - Jones & Bartlett: "*Fire Service Rapid Intervention Crews*" First Edition

For information on housing assistance, contact Ben Smith, Director of Health and Emergency Services for Wilson Community College, at [bsmith@wilsoncc.edu](mailto:bsmith@wilsoncc.edu) or 252-246-1372.

# Applicant Information

**INSTRUCTIONS:** Please type or print legibly in ink. Fill out this form completely and accurately. If an item does not apply to you, indicate by entering N/A in the blank.

Full Legal Name: \_\_\_\_\_  
(First) (Middle) (Last) (Suffix)

Preferred Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ (City/State)

Citizenship:  U.S. Born  U.S. Naturalized  Other - Please specify: \_\_\_\_\_

Education: Completed High School Diploma or equivalent? Yes No (circle yes or no)

Have you served in the U.S. Military? Yes No (circle yes or no)

If yes, which branch of service? \_\_\_\_\_ Type of discharge? \_\_\_\_\_

Emergency Contact Information (please provide minimum 1 emergency contact):

Name/Relationship: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Name/Relationship: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Name/Relationship: \_\_\_\_\_ Contact Number: \_\_\_\_\_

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# Fire Department Affiliation Validation

*(completed by affiliated Fire/Rescue Agency)*

I acknowledge that \_\_\_\_\_ *(please print cadet applicant name)* is affiliated and in good standing with \_\_\_\_\_ *(please print fire/rescue agency name)*.

By requesting the admission of the individual, I am attesting that I am aware of nothing in this person's character or reputation that would bring discredit upon this department/agency, emergency services, or Wilson Community College.

In the event this cadet applicant is not currently a paid employee of this agency, he/she understands that this letter does not guarantee or promise employment with this or any other agency, nor does this letter express or imply a guarantee of future employment in this department or any other agency.

I reserve the right to revoke our affiliation with this cadet applicant for any reason and at any time deemed appropriate by this agency. I agree to notify Wilson Community College immediately of any affiliation change with this cadet applicant.

This affiliated agency agrees to supply the cadet applicant with the necessary personal protective ensemble to safely participate in fire/rescue training to include full complement of structural firefighting ensemble with Self Contained Breathing Apparatus and extra cylinder. The personal protective ensemble shall be of good working condition and compliant with applicable industry standards.

Fire Chief/Department Head Signature: \_\_\_\_\_

Fire Chief/Department Head Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

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# Cadet Contract

As a cadet in the Wilson Community College Fire/Rescue Academy, I understand, and agree to:

1. Pass all exams with a score of 70 or above.
2. Follow all testing procedures as outlined in the Policy of Testing and the Testing Contract.
3. Follow all Policies and Procedures (*see supplemental document*)
4. Participate in physical training each day, unless excused by a physician.
5. Complete all required hours of physical training and the physical fitness test.
6. Clean the Training Center each day, and conduct any details as directed.
7. Be on time for all classes.
8. No use of tobacco products or substitute thereof during Academy hours.
9. No use of electronic communication devices during Academy hours. No cell phones allowed in the classroom.

## Cadet Testing Policy Contract

As a cadet in the Wilson Community College Fire/Rescue Academy, I understand:

1. I must pass the practical test by a minimum score of 70% to qualify to take written test.
2. If I fail the practical test on the first attempt, I can retest once with no coaching from the instructor. If I fail a second time, I will be dismissed from the academy.
3. Tested cadets must be separated from the untested cadets until the testing session is completed.
4. Cadets must be seated at least one foot apart from each other.
5. I must remove all items from the table with exception of the test booklet, answer sheet, and two No. 2 pencils or pens.
6. I must fill out my information on the answer sheet.
7. I will have 60 seconds to answer each question on each exam.
8. I must make 70% for a passing score. Any cadet receiving less than 70% will be notified and allowed to retest once.
9. I cannot make any marks on the test booklet.

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10. I cannot talk during the test, and no cheating is allowed. This will cause a failing score.
11. I cannot use electronic communication devices during test time.
12. If I fail a weekly exam, one re-take will be allowed. If a Cadet does not pass the re-take exam, the Cadet will be automatically dismissed. If any Cadet fails four written exams, the Cadet will be automatically dismissed.
13. If I have a question about a test question, I should raise my hand, and the proctor will read the question to me.
14. There is only one correct answer for each question. An unmarked question and/or two-marked answers will be counted incorrect.
15. If I should want to change a marked answer, completely erase or put an "X" through the one I want to change and mark another choice.
16. Once I complete the test, turn in both the test and the answer sheet and leave the room.

**I hereby certify that I will comply with each and every statement made on this form, and understand that any misstatement or omission of information will subject me to disqualifications or dismissal.**

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Cadet Applicant Name (*please print*)

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Cadet Applicant Name (*signature*)

# Academy Records

(must be notarized)

I hereby certify that each and every statement made on this form is true and complete, and I understand that misstatement or omission of information will subject me to disqualifications and/or dismissal.

I here by give my permission to Wilson Community College and N.C. Department of Community Colleges to release my certification training records to the N.C. Fire Rescue Commission and my sponsoring agency.

\_\_\_\_\_  
Cadet Applicant Name (*please print*)

\_\_\_\_\_  
Cadet Applicant Name (*signature*)

## STATE OF NORTH CAROLINA

**COUNTY OF** \_\_\_\_\_

This the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

Subscribed and sworn to before me,

this the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public (Official Seal)

My Commission Expires

\_\_\_\_\_ 20, \_\_\_\_\_

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