



Cumberland Fire Department Citizens Fire Academy

The Cumberland Fire Department Citizens Fire Academy is a program to help citizens better understand the fire department's firefighting operations and the multitude of services it provides to our community. The program teaches citizens about the many jobs firefighters provide on a daily basis and promotes citizen interaction with the firefighters. Citizens will gain a unique view of the lives of a professional firefighter.

Citizens will find that firefighting is more than putting out fires, but also include rescue operations, emergency medical services, fire prevention, and education. The course also provides fire safety training for the home and work place. CPR & AED certification will also be offered to those who wish to participate in obtaining their certification.

Every aspect of the academy is voluntary, so if a participant prefers to observe rather than participate in a particular exercise, the experience is still made interesting and enjoyable.

The Academy is to be held every Tuesday night from 6:30 PM – 9:30 PM over a nine (9) week period starting on March 29, 2016 at Cumberland Fire Department Headquarters 3502 Mendon Road, Cumberland, RI 02864.

The last class will be held on Saturday May 21, 2016 from 9:00 AM – 2:00 PM. CPR and AED training and certification will take place followed by commencement exercise and a luncheon.

Topics that may be covered:

Emergency Apparatus & Equipment	Emergency Preparedness & Safety
Fire Extinguisher Training	Home Evacuation planning
Fire Investigations	Emergency Medical Services
Vehicle Extrication (Jaws of Life)	Hazardous Materials
Water Rescue	Tours of the 4 fire stations
Organizational Structure	Home Safety Plans
Home Organizational Plans and Documentation	
Protective Equipment and self contained breathing apparatus	
Fire Operations including fire attack and aerial operations.	

Participants will be required to sign a "Participation Wavier and Health Notification" forms at the first meeting. The signing of these forms must be witnessed by a fire department employee. The forms are being provided with the application to allow the applicant ample time to review them.

Due to the sensitive nature of the fire service background checks will be conducted on all applicants. A signed "Background Check Consent" form must be submitted with the application.

T-Shirts will be issued to all participants. Participants will need to wear this shirt to each class to prevent wear and tear on your personal clothing. Shorts or high heel shoes **will not** be permitted during classes.

Certificates are awarded during a graduation exercise to be held at the completion of the course.

APPLICATIONS:

The application packet can be down loaded from the fire department website at www.cumberlandfire.org. Applicants must be 21 years of age or older, teenagers 16 years of age and older may attend with a participating parent. A parent who will be having a teenager attend with them must also submit a separate application and relating documents with their packet.

Applications will not be accepted by email; they must be mailed by US Mail or dropped off at the Cumberland Fire Department Headquarters located at 3502 Mendon Rd. Cumberland, RI. Applications should be clearly marked to the attention of Lt. Paul Berry. Applications that are received by email will not be approved.

Applications are to be submitted no later than March 1, 2016

Applicants will be notified by email of their acceptance into the academy.

SPECIAL NOTE

It is imperative that all participants understand that the Citizens Fire Academy is intended to be an informative experience to provide insight into how the fire department functions and what services they provide. **It is not intended to train participants as firefighters or assistants at any fires.** It is not the Academy's intent to train participants to a level where it is safe for him/her to involve themselves in any firefighting activity.



Cumberland Fire Department Citizens Fire Academy Application

The Citizens Fire Academy provides an opportunity for the residents of Cumberland to learn about the day-to-day operations of the Cumberland Fire Department. Applicants must be 21 years of age or older, be in good health, and have no criminal record. All information furnished through this application will be considered confidential.

Applicant's Name: _____
First Mi Last

Home Address: _____

Telephone: _____
Home Cell Work

Email Address: _____

Date of Birth ____/____/____ Sex: M / F Occupation: _____
MM DD YYYY Circle one

Driver's License: _____
Number Expiration Date State of Issuance

Have you ever been arrested for, convicted of, or cited for an offense other than a traffic citation? (This question does not apply to minors)

Yes: _____ Explain: _____
No: _____

Emergency Contact: _____
Person to Contact Phone Number Relationship

Do you have any limitations that would hinder you from engaging in activities associated with the Citizens Academy?

No: _____ Yes: _____ Please Explain: _____

Are you afraid of small/confined spaces? Yes: _____ No: _____
Are you afraid of heights? Yes: _____ No: _____
Will you have problems with wearing an air mask? Yes: _____ No: _____

If the Academy is filled would you like to be placed on the next Academy list? Yes: _____ No: _____

T-Shirt Size: Circle one: S M L XL 2XL 3XL

Are you interested in being certified in CPR? Yes: _____ No: _____

I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing information presented. I understand that any omissions or false information on my application shall be sufficient cause for rejection of enrollment or dismissal from the Cumberland Fire Department Citizens Academy.

I further understand that due to the sensitivity and nature of the some of the information that will be covered during this training, Cumberland Fire Department will conduct a minimum background investigation that may include any criminal history.

If I should be accepted into the citizens academy I will be required to sign a "Participation Wavier and Health Notification" forms that have been provided to me with this application.

Applicant's Signature (adult)

Date

If this application is for a minor who will be attending with a parent, the parent must sign this application.

Parent's Signature

Date

Please return completed applications to: Lt. Paul Berry
Cumberland Fire Department
Citizens Fire Academy,
3502 Mendon Road
Cumberland, RI 02864



Cumberland Fire Department Citizens Fire Academy Participation Waviver

1. The undersigned, in exchange of and in consideration for his/her participation in the **Cumberland Fire Department Citizens Fire Academy**, a program sponsored and conducted by the **Cumberland Fire District 3502 Mendon Road Cumberland, RI 02864**, and as a condition of the undersigned's participation in the **Cumberland Fire Department Citizens Academy**, the undersigned, on behalf of him/herself and his/her heirs, successors, and assigns, agrees to release and hold the **Cumberland Fire District** Cumberland Rhode Island, the Board of Fire Commissioners of the **Cumberland Fire District**, its officials, employees, agents, and assigns (collectively "the district") harmless for any physical or mental injury, (including but not limited to death), loss, delay, or any damage and expense incurred by the undersigned due to: (i) any incident beyond the district's reasonable control, including, without limitation, acts of Nature, fire, flood, smoke, crimes of violence, acts of war, or government actions and restrictions; (ii) any events directly or indirectly caused by intentional or negligent acts or omissions by any third party; (iii) risks associated with the profession of firefighting, including but not limited to risks associated with health care, transportation, crime, smoke, and fire; and (iv) any acts of omissions of the Fire District.
2. As a further condition of my participation in the **Cumberland Fire Department Citizens Fire Academy**, the undersigned, on behalf of him/her heirs, successors, and assigns agree to indemnify and hold the **Cumberland Fire District** harmless from any liability or expense, including court costs and attorney's fees, resulting from any injuries, loss or any other damage or expense caused by me during my participation in the **Cumberland Fire Department Citizens Academy**.

3. No member, official or employee of the **Cumberland Fire District** shall be personally liable to me, or any successors in interest, in the event of any default of breach by the **Cumberland Fire District**, Cumberland, Rhode Island.

Attach a copy of your current, valid driver's license to this document.

Signed on this _____ day of _____, 2016

Participant's Signature: _____

Participant's Name (printed): _____

If the Participant is 16-17 the parent must sign above.

Youth's Name: (printed): _____

Witness's Signature: _____

Witness's Name (printed): _____

Witness must be a Cumberland Fire District employee



Cumberland Fire Department Citizens Fire Academy Health Notification

The undersigned, do hereby acknowledge and understand that in my participation in the **Cumberland Fire Department Citizens Academy** I may be using a Self-Contained Breathing Apparatus (SCBA), Firefighter bunker gear and firefighting tools and equipment. I also acknowledge that with my participation I may be lifting or moving objects up to and possibly exceeding 100 lbs., climbing ladders, as well as becoming exposed to heights, live fires, and elevated temperatures. I understand that all activities in the **Cumberland Fire Department Citizens Academy** as voluntary, and that I may choose not to participate in any activity I feel uncomfortable with. I also hereby acknowledge that a doctor's physical is not required; however, if I possess any injury or ailment that may preclude me from any of the activities in the citizens fire academy i.e. respiratory ailments such as asthma or similar conditions, heart conditions or previous back, neck or joint injuries I will consult my personal physician before my enrollment in the **Cumberland Fire Department Citizens Academy**.

I have read and agree with the terms outlined above.

Signed on this _____ day of _____, 2016

Participant's Signature: _____

Participant's Name (printed): _____

If the Participant is 16 or 17 the parent must sign above.

Youth's Name: (printed): _____

Witness's Signature: _____

Witness's Name (printed): _____

Witness must be a Cumberland Fire District employee

Date: _____



Cumberland Fire Department

3502 Mendon Road
Cumberland, RI 02864
401-658-0544

DISCLAIMER

This Disclaimer must be completed by all applicants age 18 and over

Applicant's Name: _____
First Mi Last

Date of Birth: ____/____/____ Sex: M / F Maiden Name: _____
MM DD YYYY Circle one

Home Address: _____

Driver's License: _____ SSN: _____
Number Expiration Date State of Issuance

I, _____ hereby direct and authorize the Bureau of Criminal Identification of the Department of Attorney General for the State of Rhode Island and or the Chief of Police of the Cumberland Police Department to make available to the CUMBERLAND FIRE DEPARTMENT any criminal record that is on file in reference to me.

I hereby waive and release any and all manner of actions, causes of actions, and demands of every kind, nature and description, arising from any release of criminal records and requests there from, whatsoever against the State of Rhode Island, Bureau of Criminal Identification, the Attorney General and employees of the Attorney General's Office, the Chief of Police of the Cumberland Police Department, employees of the Cumberland Police Department in both law and equity which I may now have or in the future may have.

Signature of Applicant

On this _____ day of _____ 2016 subscribed and sworn before me in City/Town of _____

_____ State of _____.

Notary Public

Commission Expires: _____

A copy of photo identification with date of birth must accompany this Disclaimer