



\*Applicant must be 18 years or older to apply\*

## FIRST RESPONDER SCHOLARSHIP APPLICATION

### APPLICANT INFORMATION

Name:

Current address:

City:

State:

ZIP Code:

Phone:

Email:

Date of Birth:

How long have you lived in Clarke County?

### EMPLOYMENT INFORMATION

Current employer:

Employer address:

How long?

City:

State:

ZIP Code:

Phone:

Email:

Supervisor:

Availability during work Hours:

### REFERENCES

Please provide a letter of recommendation from your employer along with one other reference.

### ADDITIONAL QUESTIONS

Why do you desire be a First Responder?

Have you had any prior training in first aid or CPR? If so, when?

### SIGNATURES

Signature of applicant:

Date:

