

**PART A: COMPLETION INSTRUCTIONS**

<p>Forms PART A, B and C must be complete. Applications can be submitted electronically (preferred), mail, or fax. <b>Applications must be received between February 1<sup>st</sup> and April 1<sup>st</sup>.</b></p> <p>Email: <a href="mailto:jfr.info@gov.ab.ca">jfr.info@gov.ab.ca</a> 9<sup>th</sup> Floor, 9920 – 108 Street Edmonton, AB T5K 2M4 Fax: (780) 415-1509 Telephone: (780) 422-9276</p>	<p>Step 1: Review the program by visiting <a href="http://www.albertajfr.ca">www.albertajfr.ca</a> Step 2: Ensure sections 1-6 are complete. Step 3: Obtain and submit two references (from school, community / church leader or employer). Step 4: Prepare for and the take physical fitness assessment test. Step 5: Second year crew member applications must include a resume. Step 6: Use the buttons at end of form to submit electronically or print.</p>
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**1. PERSONAL INFORMATION (please print clearly if mailing)**

Surname	First Name	Preferred name	Middle Initial	Date of Birth	Day	Month	Year	
Mailing address				City		Province		Postal Code
Telephone				Email				Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Do you have a social insurance number? If not, will be required to obtain one <a href="#">immediately upon acceptance.</a>							<input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have a current First Aid and CPR certificate?						Expiry Date:		<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you be using the program to gain high school work experience credit?							<input type="checkbox"/> Yes <input type="checkbox"/> No	
Indian Status number or Metis Region (if applicable):								

**2. EMPLOYMENT / VOLUNTEER HISTORY and Special Courses, certificates, or accreditations**

Employer / position / Certificate	Your Position/Duties or credentials	Start/End Dates

**3. EDUCATION**

I affirm that I am presently a full-time student at \_\_\_\_\_, and am currently in grade \_\_\_\_\_.

**4. EMPLOYMENT EXPECTATIONS (Review and sign/date with an understanding of the seven expectations)**

- All applications are subject to screening and selection by the Junior Forest Ranger Program of Agriculture and Forestry.
- The Junior Forest Ranger program requires commitment from participants for the duration of the full work term.
- The regular work week for both all camp-based participants is Monday to Friday (36.25 hours). Camp-based participants are required to reside in camp including evenings and weekends. Camps close the long weekend in August.
- The work requires physical and mental exertion. Applicants are screened to ensure minimum physical fitness conditions are met.
- Applicants must be aware that during the program certain risks and dangers may occur including, but not limited to, the hazards of travelling in forest and mountainous terrain, accident or illness in remote places, the forces of nature, hand tool and power tool use, and travel by automobile, helicopter, boat, or other conveyances.
- The Junior Forest Ranger Program provides a non-violent workplace with a safe and healthy environment for all staff.
- The Junior Forest Ranger Program is drug and alcohol free. Any individual who does not abide by these principles may be subject to disciplinary action and parent(s) and/or guardian(s) will be notified.

**APPLICANT COMMITMENT TO EXPECTATIONS**

The applicant should only sign this form if he/she fully understands, agrees to, and accepts the above expectations of the Junior Forest Ranger Program. I certify that the information given in this application is complete to the best of my knowledge. I understand that a false statement will result in this application being rejected or I may be subject to termination of my involvement in the program.

Participant signature	Date
<input type="checkbox"/> (Online users check this box to indicate you have read and agree to the expectations above.)	

**5. PARENT(S) or GUARDIAN(S) ACCEPTANCE OF EMPLOYMENT EXPECTATIONS AND MEDICAL CONSENT**

I/we agree and accept these conditions, and give permission for my child to participate in the Junior Forest Ranger programs. I/we hereby give the crew leaders, or designate permission to use his /her judgment in obtaining the best medical services and care available for my child. I/we understand that in the event of serious illness or accident I/we will be notified.

Telephone	Name	Parent(s) or Guardian Signature(s)	Date
<input type="checkbox"/> (Online users check this box to indicate you have read and agree to the expectations above.)			
Telephone	Name	Parent(s) or Guardian Signature(s)	Date
<input type="checkbox"/> (Online users check this box to indicate you have read and agree to the expectations above.)			

**6. STATEMENT OF INTEREST**

Answer **ALL** parts in 400 words or less, on one page. **1.** Tell us about yourself and how you heard about the program. **2.** As a crew member, what will you be looking forward to? **3.** What are your plans after high school? **4.** Describe an experience you had as part of a group or team? **5.** Tell us about your experience with nature. **6.** Tell us about any leadership experience you have and why you would make a good team member.