

# The Billy Walker Jr. Foundation

"Supporting Aspiring First Responders" Fire – EMS – Law Enforcement

### Dear Applicant:

Below is a brief background into the life of Billy Walker, Jr. and what his foundation stands for, along with an application for your convenience. If you require further information, please refer to our website at <a href="https://www.thebillywalkerjrfoundation.com">www.thebillywalkerjrfoundation.com</a>.

### Carrying Forward Billy's Dream

Billy passed away on May 30, 2011 at the age of 21. From the time he was a little boy, Billy Jr. dreamed of following in his father's footsteps as a firefighter. Billy Jr. had a natural desire to help others. He started his firefighter career early serving alongside his father as a junior firefighter with the Cherry Hill Fire Department Cherry Hill, New Jersey. After high school, he enrolled in fire school and volunteered as a firefighter/EMT at the Cherry Hill Fire Department, the Pennsauken Fire Department and the Maple Shade Fire Department. He was employed by Exceptional Medical Support as an EMT and was assigned to 911 response in Atlantic City, New Jersey. While still a young man, Billy Jr. stood tall among his peers ready to protect those in need. When he wasn't working, Billy Jr. was a devoted family man and had a great love of family, friends and community that went unmatched. He loved helping others as a first responder with the fire department and as an EMT, and took great pride in his duties. Billy Jr. would be very proud to have another aspiring first responder fulfill his or her dreams in his name. He was an inspirational young man and will be dearly missed by all.

### Mission Statement: Helping Others Reach their Dream of Becoming a First Responder

The Billy Walker, Jr. Foundation is dedicated to helping others reach their dreams of becoming a first responder. This non-profit organization was established in memory of Billy J. Walker, Jr., who loved serving his community as both an EMT and volunteer firefighter. The family and friends of Billy Jr. created the foundation in his name to continue Billy's legacy of helping others. The foundation will enable others with the same dreams as Billy Jr. to receive the support to fulfill those goals.

#### Foundation Objectives:

- 1. Raise funds through annual events to support applicants that wish to bring recognition to the field of Fire, Emergency Medicine and Law Enforcement.
- 2. Contribute to individuals that want to pursue the same type of dreams that Billy Jr. had and the same character traits of work ethic, dedication, enthusiasm and desire to become a Firefighter, EMT or Law Enforcement Officer.

The awards are presented at the annual Foundation Social, recipients are requested to be in attendance.

Thank you for your interest in Fire, Emergency Medicine and Law Enforcement.



# The Billy Walker Jr. Foundation Grant Application

Applicant Name:		Date:				
Address, City, State, Zi	p:					
Home Phone:	Daytime Phone:	Social Security# Last 4 Digits:				
Email Address:		Facebook Sign On:				
	EDUCATION	IAL EXPERIENCE				
High School:		Years attended:				
College:		Years attended:				
Special courses and/or	higher education if any:					
Name of School:						
Number of course cred	dits hours to be taken under thi	s grant: Cost per credit hour:				
•		of acceptance to your educational institution with applicant Privacy Waiver and Essay.				
	FIRE/EMS/LAW ENF	ORCEMENT EXPERIENCE				
What Department(s) d	lo you currently volunteer in? _					
How long have you be	en a volunteer in this departme	ent?				
Do you have prior Fire	/EMS/Law Enforcement experie	ence; if so, where?				

## **EMPLOYMENT INFORMATION**

Current Employer:							
Address:	Phone #:						
Hire Date:	Contact Person:						
Your Position:	Annual Income:						
COMMUNITY INVOLVEMENT							
List any community involvement activities in order of their importance to you, responsibilities or positions held, and how many years you have participated in them. For example, senior center involvement, youth groups, community aide programs, blood drives, etc.							
ACTIVITY	RESPONSIBILITES/POSITION HELD	YEARS					
Briefly describe which one of these activit	ties was the most meaningful to you and why:						
	AWARDS & RECOGNITIONS						
List any awards or special recognition for academic achievement or community service.							
AWARDS OR RECOGNITION	ORGANIZATION	DATE RECEIVED					

### **ESSAY QUESTION (PLEASE ATTACH ON SEPARATE TYPED SHEET)**

Billy Walker, Jr., the young man for whom this foundation is named, personified high work ethic, courage, the ability to overcome adversity, a strong love for life, his family and friends, and had a great sense of humor. He had a love for teaching others as well as learning as much as he could about being a "First Responder". Billy had strong leadership abilities and high confidence in himself. In an essay of no less than 500 words, describe examples in your own life of where you have exemplified at least three of these qualities and why you want to become a "First Responder".

#### **SPECIAL CONSIDERATIONS OR HARDSHIPS**

If you feel that there is something else that we should know about you which could influence our decision in awarding this grant, please describe that in the space below.								
	FERENCES							
List at least five references who know you well and whom we could contact for further information about you should we decide to do so. Please list only one family member.								
NAME OF REFERENCE	RELATIONSHIP TO YOU	PHONE						
I certify that the facts contained in this application of understand that, if awarded this grant, falsified star grounds for forfeiture. By signing this application, y contact you via email with any questions about you Foundation permission to contact your employer, re	tements or omission of facts o you also grant The Billy Walke r application and you also gro	on this application shall be or Jr. Foundation permission to ant The Billy Walker Jr.						
Signature of Applicant:	Date Signed:							



# The Billy Walker Jr. Foundation Grant Application

# Applicant Privacy Waiver

## Personal Waiver Authority for Release of Information for Applicant Investigation

To: All Educational In without exception	nstitutions, Employers,	Public Safety	Agencies, Other I	nstitutions a	nd Agencies,
PRINT or TYPE					
RE:					
Applicant's LAST Name		Applicant's FIRST Name		Middle	
Street Address	Cit	City/Town		State	Zip Code
	/	()_		()_	
Social Last 4	Date of Birth	Home Ph	one	Cell Phon	e
I hereby release you, your foundamage which may result from from the date indicated below.  A Photostatic Copy of	n furnishing it to THE BILI	LY WALKER JR	. FOUNDATION. Th	is authority sha	
Applicant's Signature			Date		
State of County of					AFFIDAVIT
Before me personally appear instrument of his/her own fr		ull knowledge of			cuted the above
Sworn to and subscribed in 1	my presence this	_ day of		, 20	,
My commission evnires					
My commission expires	DATE		NOTARY	I IRI IC	