

Forest View Volunteer Rescue Squad

Membership Requirements

Thank you for your interest in joining Forest View Volunteer Rescue Squad. We accept membership applications both from experienced EMS personnel and from new volunteers just entering the field. Applicants must be at least 16 years of age. Forest View members come from various educational and employment backgrounds. Many of our members are pursuing or practicing in medical-related careers. Others are high-school, college, or graduate students pursuing other fields of study. Still others are practicing professionals in a wide variety of different disciplines. In spite of our disparities, Forest View members share some things in common—our strong commitments to teamwork, community service, and Emergency Medical Services.

Forest View helps our members to acquire and maintain EMS certification at the BLS and ALS levels; and, we provide the hands-on field experience our members need to achieve and maintain proficiency in the medical skills they learn. Forest View offers on-site training in Cardio-pulmonary Resuscitation (CPR), Thirds Skills, Health Insurance Portability and Accountability Act (HIPAA), Emergency Vehicle Operator's Course (EVOC), Emergency Medical Technician-Basic (EMT-B), Hazmat, Incident Command, Attendant-in-charge, and leadership skills. We also offer our members access to advanced courses of study in Emergency Medical Technician-Intermediate (EMT-I) and Emergency Medical Technician-Paramedic (EMT-P).

Duty requirements for Forest View members are stringent, and they must be understood and supported by spouses/significant others before you consider joining the squad. In order to provide our members with the training they need to become proficient EMS personnel, we require them to serve a MINIMUM of 40 hours per month on duty with one of our 6 crews. Crew assignments are made once new members are voted into the squad. Duty shifts may be served at any one of our 3 stations. Members rotate among these stations from shift to shift. Duty shifts are pulled every 6th day with the assigned crew. Shifts range in length from a 12-hour overnight shift (during the work week) to a 24-hour 8AM to 8AM shift (during the weekend).

New members will serve a 6-month probationary period. During that time, they will complete their Thirds Training and obtain required CPR and HIPAA certifications. Members will not be removed from Probationary Status until they obtain EMT certification. Probationary members are expected to attend all weekly duty shifts, except when an occasional and unavoidable school, family, or job-related commitment interferes. Members must give their LT advance notice, if a duty shift must be missed. Probationary members who do not meet their 40-hour-per-month duty requirement may be dismissed from the squad.

Forest View members take great pride in our organization's 55-plus years of service to the citizens of Chesterfield County and Richmond City. If you would like

further information about joining us, please fill out our online Membership Application and submit it to Forest View. Our Vice President will contact you, after reviewing your application.



Forest View Vol. Rescue Squad

Membership Application

Applicant Information

Full Name: _____ Date of Birth: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code
Home/Preferred Phone Number: () Cell Phone: () Work Phone: ()
Start Date Available: Social Security No.: E-mail Address:

Position Applied for: _____

Are you a citizen of the United States? YES NO
 If no, are you authorized to work in the U.S.? YES NO

Have you ever volunteered in Fire or EMS? YES NO
 If yes, when? _____
Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Certifications

CPR: Please list location certification was completed: _____

Completion Date: _____ Exp. Date: _____ Did you Complete? YES NO

EMT-B: Please list location certification was completed: _____

Completion Date: _____ Exp. Date: _____ Did you Complete? YES NO State:

EMT-I/P: Please list location certification was completed: _____

Completion Date: _____ Exp. Date: _____ Did you Complete? YES NO State:

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: ()

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: ()

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: ()

Address: _____

Previous Volunteer/ Career EMS Experience

Organization: _____ Phone: ()

Address: _____ Supervisor/Officer: _____

Position/ Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Organization: _____ Phone: ()

Address: _____ Supervisor/Officer: _____

Position/ Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Organization: _____ Phone: ()

Address: _____ Supervisor/Officer: _____

Position/ Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Emergency Contact

Name: _____ Relationship: _____

Address: _____ City, State, Zip: _____ Work Phone: () Home Phone: ()

Immunizations

Have you been immunized against Hepatitis Type B? YES NO

If Yes Please give location and Date: _____ Date: _____

Have you been immunized against MMR: YES NO

If Yes Please give location and Date: _____ Date: _____

When was your last tetanus shot: YES NO

If Yes Please give location and Date: _____ Date: _____

Please explain why you would like to volunteer at Forest View?

Please list your availability for volunteering.

Disclaimer and Signature

I, _____ certify that my answers are true and complete to the best of my knowledge.

If this application leads to membership, I understand that false or misleading information in my application or interview may result in my release.

I also agree to abide by all rules and procedures of Forest View Volunteer Rescue Squad as outlined by the By-laws and Standard Operating Procedures of the organization.

Volunteers are not considered employees for any purposes other than tort claims and injury compensation. Volunteer service is not creditable for any other benefit. However, volunteer service is creditable work experience. By signing this application the volunteer(s) understand(s) s/he may be subject to a reference check, background check, random drug testing, and/or criminal history inquiry.

I also agree to return any and all property to Forest View Volunteer Rescue Squad that has been issued to me as a member upon leaving the squad under any circumstances.

Signature: _____ Date: _____

Return all membership application materials to:

Forest View Vol. Rescue Squad
Attention: Vice President
P O Box 36153
Richmond, Virginia 23235-8003