

Cave Spring Rescue Squad Flowchart for Prospective Members

- 1. Fill out the Roanoke County and Cave Spring Rescue Squad (CSRS) Applications along with the CSRS and Roanoke County observer forms and return them to the Rescue Squad any week night after 6 PM or anytime on weekends.**
- 2. The Deputy Chief will notify you when you are cleared to observe. This usually takes five to seven business days. You MUST observe with at least three different duty teams.**
- 3. We will do a First Reading of your application at the first business meeting after you submit your application. These meetings are the first Wednesday of each month at 1930 hours. You need to be present if possible, so the crew can meet you.**
- 4. Once your application has been read for the First Reading- You will be given the **PINK** copy of the RCFRD application (after the Deputy Chief has signed the form) to meet with Jennifer Sexton. While you are there, you will complete a criminal history check form (18 & over). Be sure to bring the required ID and requested information that is outlined on the goldenrod info sheet. If you are under 18, you must be accompanied by a parent or legal guardian.**
- 5. The membership committee will contact you during the first month to set up an appointment for an interview. If you are under 18, you must be accompanied by a parent or legal guardian.**
- 6. At the following month's meeting, we will do a Second Reading of your application if we have received the criminal history results and all paperwork is complete. The crew will then vote to accept or decline your application for membership. IF accepted , you will then be assigned to a duty team for a 6-month probationary period. You need to be present at this meeting.**
- 7. You must complete the Roanoke County online Rookie Orientation ASAP after you are accepted as a probationary member. Once you complete Rookie Orientation you will need to make a second appointment with Jennifer Sexton to have your picture taken for your ID keycard. You will need to wear a uniform shirt for your picture.**
- 8. You must be enrolled in an Emergency Medical Technician class within 6 months of being accepted for probationary membership. The crew will assist you in finding a class.**
- 9. If you have any question, please feel free to contact me.**

Thank you for your interest in joining our agency!

**Jessie Bailey
Deputy Chief
Cave Spring Rescue Squad
deputychief@csrescue.org**

Cave Spring Rescue Squad Application for Membership

Personal Information

Last Name: _____ First: _____ Middle: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Phone# _____ Work Phone# _____
Cell Phone # _____ Pager # _____
Social Security Number: _____ Date of Birth _____
Age: _____
E-mail address: _____

Current Employer Information

Employers Name: _____
Supervisors Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone # _____ Best time to Call: _____

Current Certifications

Certification: _____ Expires on: _____
Certification: _____ Expires on: _____
Certification: _____ Expires on: _____
Certification: _____ Expires on: _____

Please attach a photocopy of all certifications

Have you ever been a member of any Fire or EMS Agency? Yes _____ No _____
If yes please detail below, give Agency Name, Dates of Service, & Reason for Leaving, also include a Supervising Officers Name and Title along with a telephone number where they can be reached.

Have you ever been arrested? Yes _____ No _____
Have you ever been charged with a felony? Yes _____ No _____
If yes please explain in detail.

Are you currently, or have you ever been a member of an organization that would prohibit you from, or influence your decision to render care to any patient with regard to their sex, race, or religion? Yes _____ No _____
If yes, please explain.

Please list membership - current or past - in any civic organizations, clubs or associations.

Please list the Name and location of the High School, and any College, University or Trade School that you have attended, and list any degrees or certifications attained.

Personal References – Do Not List Relatives or Employers

High School Students MUST list at least one teacher

Reference One

Name:

Address:

Home Phone# _____ Work Phone# _____

Years Known _____ Relationship _____

Reference Two

Name:

Address:

Home Phone# _____ Work Phone# _____

Years Known _____ Relationship _____

Reference Three

Name: _____

Address: _____

Home Phone# _____ **Work Phone#** _____
Years Known _____ **Relationship** _____

Person to notify in case of an Emergency

Last Name: _____ **First:** _____

Relationship: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone# _____ **Work Phone#** _____

Cell# _____

How did you learn about Cave Spring Rescue Squad?

Please list any friends who are members of Cave Spring Rescue Squad.

Member _____ **Years Known** _____

Member _____ **Years Known** _____

Member _____ **Years Known** _____

Agreement & Authorization

By signing below, I attest the information in this application is true and complete. I understand that any false statements will be sufficient cause for termination of my subsequent membership. I understand that by signing this application, I agree to abide by all of the rules and regulations set forth by Cave Spring Rescue Squad. I understand that failure to abide by these rules may result in dismissal from Cave Spring Rescue Squad. I also agree that all equipment issued to me will be returned in satisfactory condition at the request of the squad or its agents. Failure to return any equipment will obligate me to pay for its replacement cost to Cave Spring Rescue Squad.

I hereby authorize Cave Spring Rescue Squad to conduct a background investigation, which may include information as to my character, general reputation, and personal characteristics. I authorize school officials and past and present employers to provide any information as to my background.

Applicant's signature: _____

Print Name: _____

Date: _____

If Applicant is a minor, signature of a parent or guardian is required.
By signing below, I am indicating that I am aware that my child is applying for membership with Cave Spring Rescue Squad, and I agree fully with the above authorization concerning allowing Cave Spring Rescue Squad to conduct a background investigation on my child, to include school records if necessary. I further understand that if accepted for membership, my child must comply with all rules and regulations set forth by Cave Spring Rescue Squad. I agree to be responsible for all equipment issued to my child, and will be responsible for replacement cost for any lost or damaged equipment.

Parent's signature: _____
Print Name: _____
Relationship: _____
Date: _____