



Serving the Citizens of Chesterfield County, Since 1954

Station 1 – 3500 Courthouse Road – 804-276-4344

Station 2 – 7810 Winterpock Road – 804-639-7911

Dear Applicant,

We are very pleased you are considering joining the Manchester Volunteer Rescue Squad. This membership packet has a lot of information which we feel will help you decide if you wish to further pursue this interest.

As a member of our organization, you must be 18 years of age or older. You will be assigned to a duty crew and will ride with the same crew each week, but you will have the opportunity to ride more often if you wish and attend special events. You will be required to be on duty at one of our two stations, either the Courthouse Road or Winterpock Road station. Your duty shift will be every sixth night from 6pm until 6am the following morning. Our weekend shifts are from 6pm Friday to 8am Saturday, 8am Saturday to 8am Sunday and 8am Sunday to 6am Monday. Excused absences from duty are illness, family death, vacation, work, or class scheduled during your duty hours. Your duty hour requirements must be met each month. College students may apply for student leave while away at school, relieving the student of riding requirements, except during breaks and summer vacation.

After being accepted into membership, you must be enrolled in an EMT (Emergency Medical Technician) course within six months. This class is approximately 120 hours in length and classes are available through the community college system and various area rescue squad organizations. The Virginia state EMT certification is valid for four years and continuing education classes are available to assist in recertification. CPR BLS Provider certification is also required and must be renewed every two years. Other courses are available for those wishing to further their certifications to the Advanced EMT or Paramedic level. All members must remain certified as an EMT and an Emergency Vehicle Operator during their tenure.

All applicants will be interviewed, and if selected to continue in the process, will be required to complete a “New Member Orientation Program” which is 40 hours in length and covers multiple topics to prepare you for running emergency calls. Typically the program runs twice a week for 3-4 hours in length depending on the topics being discussed. There is also mandatory work that will be done at home during this time. You will also be required to complete a thorough background check, medical physical through our occupational health facility, and a pre-employment drug test.

If you feel that you can commit to the amount of time required for duty hours and training, and would like to pursue membership, please fill out the attached application. Follow the directions enclosed and one of our leadership team members will contact you.

Again we would like to thank you for your interest and look forward to meeting you soon. Without committed volunteers our organization would not exist. We take pride in our members and are proud to say we have been serving the community since 1954.

Sincerely,

Christopher G. Snyder

Christopher G. Snyder
Chief of Operations



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Application Information and Checklist

APPLICANTS TO THE MANCHESTER VOLUNTEER RESCUE SQUAD MUST

- Submit a fully completed and signed application. A completed application includes all supporting materials.
- Sign the volunteer service commitment.
- Provide a copy of your EMS certifications, CPR card and any other current Fire/Rescue/EMS certifications you possess.
- Submit your application by mail or in person to the Courthouse Road station.
- Successfully complete the New Member Orientation Program.
- Successfully pass a pre-employment drug test.
- Successfully pass a thorough background check.
- Successfully complete a medical physical examination.

PLEASE DO NOT APPLY IF

- You are unable to meet the required time commitment.
- You are not at least 18 years old.
- You are not immediately available to begin the orientation and membership process.
- Lifting weight and working under stressful conditions will compromise your physical and mental well being.



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References

Each application requires 3 references. Use persons for references that you have known at least one year. You may use only one Manchester Volunteer Rescue Squad member as a reference.

Types of Membership

Active Membership: Active members provide direct patient care and rescue services. They are required to serve a minimum of one duty shift every six days on an assigned crew.

Auxiliary: Auxiliary members assist in the fund-raising for the organization. These members also volunteer their time in other areas of the organization; however do not participate in active riding duty.

Correspondence Address

Manchester Volunteer Rescue Squad

Attn: Recruitment Team – P.O. Box 198 – Chesterfield, Virginia 23832

recruitment@manchestervrs.org



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Active Membership Volunteer Service Commitment

I _____, on my honor, hereby commit to:
(Print Full Name Here)

- Provide volunteer service a minimum of one duty shift (at least 12 hours) per week. I will provide service including nights, weekends, holidays, and summer vacation periods.
- Provide a minimum of 24 months of consecutive service including weekends, summers, and holidays.
- Attend quarterly membership meetings.
- Maintain EMS certifications and complete all required mandatory training sessions.
- Comply with the Bylaws and Policies and Procedures of the organization, and the direction of all officers.
- Maintain patient confidentiality.

I understand membership in the Manchester Volunteer Rescue Squad is at will and may be terminated at any time by the Board of Directors and/or the Membership body.

Signature of Applicant

Date



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RECORD OF CONVICTION

Have you ever been convicted of a crime other than a minor traffic offense? ____ Yes ____ No

List any criminal charges that have been brought against you, except those, which have resulted in a finding of not guilty or a complete dismissal. (Please use a separate sheet)

A conviction will not necessarily automatically disqualify you for membership. Rather, factors such as age, date of conviction, seriousness and nature of the crime, and rehabilitation will be considered.

EDUCATIONAL DATA

High School: Year Completed: 1 2 3 4 / Diploma: ____ Yes ____ No / GED: ____ Yes ____ No

School: _____ City/State: _____

University/Vocational School: Years Completed: 1 2 3 4 Degree(s) Earned: _____

School: _____ City/State: _____

Major(s): _____

EDUCATIONAL SUPPLEMENT (for current students only)

School you attend now: _____ Expected date of graduation: _____

Area of Academic Concentration/Major: _____

Possible Career/Post Graduation Plans: _____

EMPLOYMENT INFORMATION (current employer)

Position: _____

Employer: _____ Department: _____

Address: _____ Telephone: _____

Supervisor: _____ Weekly Hours: _____ Full Time: ____ Part Time: ____

Duties: _____



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REFERENCES (only one MVRS Member may be used)

Name: _____ Phone: _____

Email: _____ Relationship: _____

Name: _____ Phone: _____

Email: _____ Relationship: _____

Name: _____ Phone: _____

Email: _____ Relationship: _____



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APPLICANTS CERTIFICATION AND AGREEMENT/LIABILITY RELEASE

I hereby certify that the facts set forth in the above application are true and complete to the best of my knowledge. I authorize the Manchester Volunteer Rescue Squad and its Officer's to verify their accuracy and to obtain reference information by contacting educational institutions, references or employers, and to rely on and use such information as they see fit. I hereby release the Manchester Volunteer Rescue Squad, its Officer's, Directors, and Members from any and all liability of whatever kind and nature, which, at any time, could result from obtaining and have a membership decision based on such information. This application and all information is the property of the Manchester Volunteer Rescue Squad.

I understand that, if granted membership, falsified statements of any kind or omissions of facts called for on this application, regardless of time of discovery, shall be considered sufficient basis for dismissal.

I understand that should an offer of membership be extended to me and accepted that I will fully adhere to the policies, rules and regulations of the organization. I further understand, however, that neither the policies, rules, regulations of membership nor anything said during the application and interview process shall be deemed to constitute the terms of an implied contract for continued membership. I understand that any membership is for an indefinite duration and is at-will and that either the organization or I may terminate my membership at any time.

I understand that if I am offered membership, membership is conditioned upon my providing other information to the Membership Committee and/or the Board of Directors.

I understand and agree to, and do hereby waive any and all claims against the Manchester Volunteer Rescue Squad, County of Chesterfield, Chesterfield County Fire and EMS Department, or the members with whom I ride, for any injury or accident occurring to me while on the organization's apparatus. This waiver shall be and is binding upon my heirs, my personal representatives and myself.

Printed Name of Applicant: _____

Signature of Applicant: _____

Date: _____