



United Communities Volunteer Fire Department Incorporated

P.O. Box 939, Stevensville, Maryland 21666

Fire • Police • Ambulance

CALL 911

NEW MEMBER APPLICATION PACKAGE

BASIC REQUIREMENTS: The United Communities Volunteer Fire Department is accepting membership applications for three specific areas of involvement within our organization. You can choose which type of membership status you would like to apply for and may change your status at any time as long as you meet the basic requirements for each area of involvement. Below are the different positions and brief descriptions about each.

Firefighter and EMS

- Must attend meetings, drills, and functions within the administrative year.
- Must meet Fire / EMS protocols for the administrative year.
- Must obtain Firefighter or EMT certification within 2 years of admission into the company. (It's FREE!)

EMS Only

- Must attend meetings, drills, and functions within the administrative year.
- Must meet all EMS protocols for the administrative year.
- Must obtain EMT certification within 2 years of admission into the company. (It's FREE!)
- Maryland Certified Paramedics are encouraged to apply!

Administrative / Associate Member

- If fundraising, public safety awareness, building maintenance, administration or any non-Firefighting and EMS related activities are of interest -- this is for you!

BENEFITS: There are many benefits to becoming a member of UCVFD:

- Free Training: All Fire / EMS training provided at no cost to you.
- Retirement: Countywide LOSAP benefit.
- Dedication: Sense of community and knowing you are serving a good cause.
- Family: Get to know and become lifelong friends with fellow members.
- State Tax Deduction.
- Incentive Program within the Department
- County Home Buying Assistance Program: must meet certain criteria for eligibility

Thank you for your interest in joining the United Communities Volunteer Fire Department. We hope you become an involved, active and productive member of our company. Please visit the station and become more familiar with these membership opportunities.

DUTIES AND RESPONSIBILITIES

Position Summary: Fire and/or EMS

- Perform Firefighting / EMS duties and other related work as required.
- This is manual work of a hazardous nature involving the fighting of fires, rescue and/or providing either basic life support or advanced life support to patients, generally under the supervision of Department Officers.
- Regular training and maintenance work in and around the fire station and equipment is required.
- Firefighter / EMS personnel may be required to make decisions and work without supervision until an officer arrives at the scene.
- Respond to all types of emergencies that include Fire and EMS calls as well as any type of rescue or hazardous material incident assigned to his/her division.
- Answer calls for citizen assistance.
- New Fire / EMS members will be required to submit an attached Medical History Summary as well as undergo a New Member Physical (Paid for by the Department).

Time Pressures:

- Candidates can experience a high degree of pressure associated with emergency situations involving both Fire and EMS incidents.
- Requirements for meeting deadlines with respect to reports and other required documentation.

Supervision Received:

- Member reports directly to the Station Officers of the Division they are assigned.
- Candidates must recognize that the fire service is a paramilitary organization with a standardized chain of command.

Interpersonal Skills:

- Daily interaction and communications with other Firefighter / EMS personnel, Station Offices, Senior Officers, Civic Leadership, County Employees and the Public.
- A high degree of confidentiality is required.

Physical Demands:

- Must have the ability to endure mental and physical stress associated with emergency situations in difficult environments.
- Must be able to meet minimum physical demands required for this position.

Additional Comments

- Education and/or acceptable equivalents in training and experience will be an asset.
- Assists in cleaning and preparing Firefighting / EMS personnel equipment to in-service status upon return to the station after an emergency call or drill.
- Attends regular training sessions to practice procedures and to learn Firefighting, EMS and rescue methods.
- Cleans and maintains areas of the fire station used by the members.

Experience/Skills

- Mental alertness, mechanical aptitude.
- Ability to get along well with others.
- Willingness to perform any task as assigned.
- Conscientious and dependable.
- Good physical condition.

Work Environment

- Volunteer Firefighter / EMS personnel are expected to respond to and work in all types of weather under less than ideal conditions.
- Monitor radio communications for alerts and responds to emergency calls when required.
- Members are expected to enter hazardous atmospheres and areas that involve personal risk.
- Firefighter / EMS personnel will be expected to work in a safe manner, in accordance with all applicable standards, regulations, and policies.

Position Summary: Administrative or Associate

- Perform support functions and other related work as required.
- Aid and assist the Department in the delivery of non-emergency duties and actions.
- Perform administrative task as requested by the Department leadership.
- Participate in fundraising efforts sponsored by the Department and the community.
- Represent the Department at speaking engagements and other community events.
- May be asked to operate Fire Department vehicles in a non-emergency status.
- Perform routine station and apparatus maintenance as needed.
- May be asked to provide logistical or support functions on the scene of an emergency.
- Answer calls for citizen assistance.
- Be required to make decisions and work without direct supervision.
- Associate members may not hold office within the Department or have voting privileges.

(Please keep first three pages for your records)



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APPLICATION FOR MEMBERSHIP

Equal Employment Opportunity:

United Communities Volunteer Fire Department does not discriminate against applicants for membership on the basis of race, color, religious origin, sex, age or disability.

Requirement for Membership:

- 1) Applicant must be sixteen (16) years of age or older and a U.S. citizen.
- 2) An applicant who is currently an active member in another Queen Anne's County volunteer Fire / EMS organization may not be accepted until documentation is received from the previous department that active membership has been terminated.

Expectations of New Members:

- 1) All members are expected to be present at monthly business meetings and training drills.
- 2) All members are expected to be kind, courteous, honest and positive representatives of the department at all times.
- 3) All applicants will operate as a probationary member for six (6) months or more.
- 4) Probationary Members will be assigned to a training officer to aid them in acquiring the necessary requirements needed to ride apparatus.

Applicant Name:

Last _____ First _____ Middle _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Work Phone _____ Email address _____

Membership Classification Requested:

Firefighter

EMS

Both

Associate Member

Administrative

Not Sure

PERSONAL INFORMATION

Legal Name: _____

Nickname/Preferred Name: _____ Sex: Male Female

Date of Birth: _____ Place of Birth: _____

Driver's License #: _____ State: _____ License Class: _____

Expiration Date: _____ Valid: Yes No

Have you had any traffic violations (accidents and/or points) in the past 3 years? Yes No

If so explain: _____

Marital Status: Single Married Divorced Widowed

Social Security Number: _____ - _____ - _____

How long have you lived at current address: _____

Emergency Contact Person:

Name: _____ Relationship: _____

Address: _____

City, State, Zip _____

Phone Numbers (home / cell): _____

Designated Beneficiary:

Name: _____ Relationship: _____

Address: _____

City, State, Zip _____

Phone Numbers (home / cell): _____

MEDICAL HISTORY

1) Have you ever been diagnosed or do you presently have any medical condition(s) that would affect your ability to properly operate an emergency vehicle: Yes No

2) Do you have any medical restrictions or requirements on your driver's license? Yes No
If yes, please explain: _____

3) Are you allergic to anything? _____

4) Are you currently under a doctor's care for any of the following medical conditions that could affect your ability to perform the duties of a Firefighter or EMT?

- Heart Condition
- Back injury or chronic ailment
- Asthma
- Hypertension
- Other (specify) _____

BACKGROUND INFORMATION

(All applicants are required to pass a background investigation.)

1) Have you ever been arrested for a felony or misdemeanor? Yes No
If yes, for what were you arrested, when and where? _____

2) Have you ever been convicted for a felony or misdemeanor? Yes No
(Applicant may be subject to being finger printed)

If yes, for what were you convicted, when and where? _____

3) Are you now or have you ever been under investigation, indictment, or probation for a felony or misdemeanor: Yes No
If yes, explain: _____

4) Do you or have you ever used illegal drugs? Yes No

Comments: _____

EDUCATION

GED: _____ Date Issued: _____

High School: _____ Highest Grade Completed: _____

Technical / Trade School: _____ Course of Study: _____

College: _____ Major/Degree: _____

Other Educational Training: _____ Major/Degree: _____

Other Educational Training: _____ Major/Degree: _____

MILITARY SERVICE & EMPLOYMENT HISTORY

Military Branch: _____ Status _____

Discharge Date: _____ Classification _____

Present Employer: _____ Phone: _____

Supervisor's Name: _____ Phone: _____

Work Address: _____ Position: _____

_____ How Long: _____

Previous Employer (if less than 5 years): _____

Address: _____ Phone: _____

REFERENCES

Please list two (2) character references that you have known for at least three (3) years, who are not related to you, and are not past or present employers.

Name: _____ Phone: _____

Address: _____

Email: _____ Relationship: _____

Name: _____ Phone: _____

Address: _____

Email: _____ Relationship: _____

List any members of the United Communities Volunteer Fire Department with whom you are acquainted:

FIRE & EMS EXPERIENCE

1) Have you ever applied to or been a member of this Department before: Yes No

If yes, please give dates, and the circumstances under which you left the department:

2) Have you ever served in another Fire / EMS department? Yes No

If yes, please provide the name of the department(s), dates of your service:

3) List any and all offices held at previous departments:

4) List any Fire / EMS, Rescue or related classes your have taken. Please include photocopy of certificates:

5) Are you a certified Maryland or National Registry EMT or Paramedic? Yes No

6) List any other skills you have that would be beneficial to this department:

7) Are you able to perform all the duties listed in the job description: Yes No

If no, please explain:

SIGN AND SUBMIT TO AN OFFICER

I certify that the information I have given in this application is true and complete according to the best of my knowledge. I recognize that any misrepresentation or falsification will be cause for rejection of this application or for dismissal, if discovered after I have been accepted. I understand that I may be required to pass a medical examination and be asked to submit to a drug screening. In addition, I authorize United Communities Volunteer Fire Department to access any criminal history files. I further authorize the Department to access my motor vehicle records to review my driving history. I understand this authorization allows the review of criminal and driving records at any time during my association with the Department. I also agree to meet all requirements and follow all standard operating procedures of the United Communities Volunteer Fire Department.

Signed: _____ Date: _____

Witness: _____ Date: _____

If applicant is under the age of 18, a signature of a parent or legal guardian is required.

Signed: _____ Date: _____

Parent/Legal Guardian's Signature

Date Received: _____

Received By: _____

Probation Start: _____

Active Membership: _____