



BE THE HANDS

That Can Impact Your Community!

Join Burlington Rescue Squad

(262) 767-1105

www.burlingtonrescuesquad.com

(262) 767-1105

BURLINGTON RESCUE SQUAD, INC.

APPLICATION FOR MEMBERSHIP

Burlington Rescue Squad is an all volunteer organization, serving the City of Burlington, the Town of Burlington and surrounding communities. We are the main 911 Emergency providers 24/7/365.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone (H): _____ (C): _____

Length Of Time At Current Address: _____

Email Address: _____

Best way to get ahold of you: Cellphone House phone Mail

Are you over the age of 18? yes no

Current Level Of Training And Relevant Certifications:

Are you currently involved in EMS? Yes No

If yes, please indicate your current level of licensure: CPR Certified First Responder

EMT-B EMT-I EMT-AEMT Paramedic

None; still in school. My classes are scheduled to end on: _____

Please provide copies of your current licensure (ie EMT-B, CPR, etc).

List any other pertinent training (ie: EVOC, Diver or Water Rescue Certified):

Employment History

Current Employer: _____

Address: _____

Supervisor: _____

Employment dates with this employer: _____

Prior Employer: _____

Address: _____

Supervisor: _____

Employment dates with this employer: _____

Reason for departure: _____

Prior Employer: _____

Address: _____

Supervisor: _____

Employment dates with this employer: _____

Reason for departure: _____

Education

High School: _____

City/State/Zip: _____

Graduation Year: _____

Post High School:

School/College: _____

Major Study: _____

Degree/Certificate: _____

Graduation Year: _____

School/College: _____

Major Study: _____

Degree/Certificate: _____

Graduation Year: _____

Current Work Schedule:

M_____ T_____ W_____ R_____ F_____ Sa_____ Su_____

Availability To Respond to Burlington Rescue Squad calls:

M_____ T_____ W_____ R_____ F_____ Sa_____ Su_____

Please add any comments which may be pertinent to the active BRS member (i.e. Things we should know that were not covered already)

Drug Test / Physical:

By signing my initials to the end of this statement, I understand that before I can become a probationary member of Burlington Rescue Squad, one of my qualifications include to take a scheduled drug test and physical, resulting in passing them both successfully. _____

I hereby affirm and declare that the above information on this application is true and correct and that any fraudulent information may be considered a sufficient cause for rejection or immediate termination.

I also acknowledge that by signing below, I hereby authorize Burlington Rescue Squad, Inc. to conduct any background checks; including checking/contact employment references.

Signature

Date

Membership does not infer a contract of employment.

Thank you for your interest in Burlington Rescue Squad

Burlington Rescue Squad Office Use Only

Date Application Received: _____

Date applicant passed drug/physical test: _____

Applicant contacted: _____

Date LCA was completed: _____

Interview Date: _____

Mentor assigned: _____ Date: _____

Interviewed by: _____

Date equipment/clothing issued (initiated): _____

Applicant discussed at General Meeting by membership-date: _____

Date applicant is eligible for "Full Time Status" with BRS: _____

Applicant voted into a "probationary status" - y / n

Date applicant was voted as "Full Time Member" by BRS: _____

Date applicant was notified on membership status: _____