



MAD RIVER TOWNSHIP FIRE & EMS DEPARTMENT AUXILIARY



Roles and Responsibilities

On Scene Emergency Support

Auxiliary Team Members will respond to emergency scenes as requested by command and will provide food and drinks to refuel firefighters. The Auxiliary Team responds and works out of an SUV called Utility 50. This vehicle allows team members to carry supplies needed to assist with rehab at incidents and other events.

Duties: Once given a location, team members will begin to set up an official rehab area for the incident. Members may be tasked with setting up pop up tents, tarps, and tables. Team members will also prepare and provide food and snacks, along with coolers filled with refreshments, ice, and towels. Team members check in with other emergency workers like pump operators and police officers who may not be able to leave their assigned positions.

Commitment: Team members ultimately determine their own availability. Each emergency scene is different but most average from 1-6 hours. The team will remain on scene with crews until released by the department.

Training: All new team members will receive an initial orientation conducted by the department. During orientation team members will complete HIPAA training, drivers training, and will become familiar with tasks and job responsibilities of the position. Initially members will be paired with more experienced team members so they can become familiar with the processes.

Notification of Team Response: Members will be given a radio pager that will alert when needed to respond to the station to prepare for a response to an emergency scene. Team members may also be contacted by a Team Leader who will request assistance and see if members are available. If members are available, they will be asked to respond to the station to assist and mobilize the response.

Social Activities Support

Duties: Assist with planning, executing, and providing support for department related activities in the community. Activities include local parades, 4th of July Picnic and Fireworks, Apple Butter, Fire Prevention, Halloween Open House, and the annual Santa Parade.

Commitment: Team members ultimately determine their own availability. Each event is different but most average from 1-3 hours.

Training: Mandatory HIPAA Training

Notification of Team Response: Team members will receive an email notification of upcoming events and details on what is needed for support.



MAD RIVER TOWNSHIP FIRE & EMS DEPARTMENT AUXILIARY



Requirements and Application

The Mad River Township Fire & EMS Department Auxiliary is a group of men and women that volunteer and support the Mad River Township Fire & EMS Department as well as within the community. Auxiliary members provide the following services to the department and community:

- Support the Department at Emergency Scenes.
 - Provide Firefighters with drinks/food/etc. when the respond to a fire, accident, or any other emergencies.
- Assist with Department sponsored activities in the community. From parades, 4th of July Picnic, Apple Butter, Fire Prevention, and Santa Parade to just name a few.

All interested applicants must meet the following criteria:

1. Must be 21 years of age.
2. Must pass a background check.
3. Have a valid Driver's License.
4. Complete HIPAA training provided by Mad River Township Fire & EMS Department.
5. Pass a driver's training course provided by the department.
6. Must be physically able to carry out work as required.

Applicant Information

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

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: () _____ E-mail Address: _____

Social Security No.: _____ Driver's License : _____

Days / hours avail: _____

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 worked for this department? YES NO If so, when? _____

Are you 18 years of age or older? YES NO

Have you ever been convicted of a crime other than a traffic violation? YES NO

If yes, explain: _____

FORM A: BACKGROUND CHECK NOTICE TO APPLICANT

Employment with the Mad River Township requires that an individual’s past history be investigated to determine whether the person can qualify for consideration for employment. The purpose of this notice is to inform you that we will be conducting a pre-employment background investigation in conjunction with your application for employment with Mad River Township. This background investigation may involve verifying or reviewing any of the following relevant information:

- Social Security Number
- Credit History
- DMV Record
- Criminal Convictions
- Prior Employment History
- Educational History
- Date of Birth

As part of this investigation, the Mad River Township or a designee may obtain a consumer report (e.g. credit history, criminal history, driving history, etc.) from a Consumer Reporting Agency. The Mad River Township may use information in the consumer report for decisions related to your employment. A copy of the report will be provided to you, free of charge, if you wish.

In accordance with the Fair Credit Reporting Act (15 U.S.C. 1681 et. seq.) you will be notified in writing before the Township makes any adverse employment decision, which is based in whole or in part on the consumer report.

By executing the Authorization From Applicant to Obtain Consumer Report, you authorize the Company to obtain this consumer report. If you wish to receive a copy of the report, please include your address below. This notice and authorization is in accordance with the Fair Credit Reporting Act.

Notice Received by _____

Date: _____

FORM B: AUTHORIZATION FROM APPLICANT TO OBTAIN CONSUMER REPORT

This release and authorization acknowledges that the Mad River Township or a designee may now, or at any time while I am employed, contact personal references, conduct a verification of my education and licenses/certifications, employment/work history, credit history, motor vehicle records, and receive any criminal history record information pertaining to me which may be in the files of any Federal, State or Local criminal justice agency, and to verify any other information deemed necessary to fulfill the job requirements. The results of this verification process will be used to make employment decisions pursuant to the Mad River Township Policies. I understand and authorize the Mad River Township or a designee to use employment verification, criminal background check, credit history check or other to verify and provide information to the Mad River Township or a designee regarding my education, employment history, motor vehicle record, criminal history, credit history, etc. I authorize the Mad River Township's staff and/or vendors and any of their associates, to disclose orally and in writing the results of this verification process to the designated authorized representative of Mad River Township. I understand that the Mad River Township may at its discretion change the vendor and this release will remain in effect.

I have read and understand this release and consent, and I authorize the background verification. I authorize all persons, schools, current and former employers and other organizations and agencies to provide the Township's vendors, or its associates with all information that may be requested. I hereby release all of the persons and agencies providing such information from any and all claims and damages connected with their release of any requested information. I agree that any copy of this document is as valid as the original. I do hereby agree to release and discharge Mad River Township, the employment verification vendor, and their associates to the full extent permitted by the law from any claims, damages, losses, liabilities, costs and expenses or any other charge or complaint filed with any agency arising from the retrieving and reporting of information. According to the Fair Credit Reporting Act, I am entitled to know if employment was denied based on information obtained by my prospective employer and to receive a disclosure of the public record information and of the nature and scope of the investigative report. I have been given a summary of my rights under the Fair Credit Reporting Act

I authorize the Mad River Township to obtain a consumer report for employment purposes.

Signature: _____ **DOB:** _____

Name (print): _____ **Date:** _____

I wish to receive a copy of my consumer report at the address below			
Yes	No	Initials	_____
Street Address	City	State	Zip Code