



SPRING HILL COMMUNITY AMBULANCE CORPS

48 BRICK CHURCH ROAD
SPRING VALLEY, NY 10977
(845) 354-3435 main ☒ (845) 354-0618 administration
(845) 354-3284 fax ☒ <http://www.springhillems.org>

APPLICATION FOR MEMBERSHIP

PERSONAL DATA

NAME _____
LAST FIRST MI

STREET ADDRESS _____

MAILING ADDRESS _____

HOME PHONE _____ WORK PHONE _____

PAGER/CELL _____ EMAIL _____

18+ YEARS OF AGE? ☒ YES ☒ NO SOC SEC NO _____

ALLERGIES _____ ☒ NONE

CURRENT OCCUPATION _____

NAME OF EMPLOYER _____

ADDRESS OF EMPLOYER _____

BACKGROUND

Have you ever been convicted of a felony?	☒ YES ☒ NO
Have you ever served in the armed forces of the United States?	☒ YES ☒ NO
Have you ever received a discharge from the armed forces of the United States that was other than honorable?	☒ YES ☒ NO
Have you ever been removed involuntarily from membership in another ambulance, fire, public safety service, fraternal organization, or service club?	☒ YES ☒ NO
Is there any reason why you could not safely perform all required membership duties without exposing yourself, other members, or the community at large to danger or harm?	☒ YES ☒ NO
Have you any medical condition that would prevent you from safely performing all required membership duties (including operating a motor vehicle)?	☒ YES ☒ NO

If any of the questions in this section were answered "yes", supply complete details here. Attach additional sheets if needed.

CLEARLY PRINT OR TYPE ALL INFORMATION EXCEPT SIGNATURES ☒ FALSE INFORMATION WILL RESULT IN IMMEDIATE EXPLUSION FROM MEMBERSHIP, AND MAY BE A VIOLATION OF LAW ☒ SPRING HILL DOES NOT DISCRIMINATE ON THE BASIS OF ANY REASON PROHIBITED BY LAW

EMERGENCY CONTACT INFORMATION

NAME _____ RELATION _____

ADDRESS _____

PHONE _____ ALT PHONE _____

ALTERNATE EMERGENCY CONTACT INFORMATION

NAME _____ RELATION _____

ADDRESS _____

PHONE _____ ALT PHONE _____

DRIVER LICENSE

CLASS _____ STATE _____ NUMBER _____

LIST ALL ACCIDENTS OF ANY KIND WITHIN THE PAST THIRTY-SIX (36) MONTHS

LIST ALL DRIVING CONVICTIONS WITHIN THE PAST TEN (10) YEARS

DESCRIBE IN DETAIL ANY RESTRICTIONS ON DRIVING ABILITY (LENSES, ETC.)

CERTIFICATIONS
ATTACH PHOTOCOPIES OF ALL CERTIFICATIONS

CERTIFICATE	AUTHORITY	CERT #	EXPIRES
CPR [LEVEL _____]	_____	_____	_____
CFR	_____	_____	_____
EMT [LEVEL _____]	_____	_____	_____
NREMT [LEVEL _____]	_____	_____	_____
OSHA/BLOODBORNE PATHOGENS	_____	_____	_____
HAZMAT	_____	_____	_____
CEVO/DEFENSIVE DRIVING	_____	_____	_____
EVOC/EMERGENCY OPERATION	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ARE YOU CURRENTLY A MEMBER OF ANOTHER AMBULANCE, FIRE, OR PUBLIC SAFETY SERVICE? YES NO

IF YES, ATTACH A LETTER OF RECOMMENDATION FROM A SENIOR OFFICER OF EACH SERVICE OR AGENCY. THE LETTER MUST SPECIFY HOW LONG YOU HAVE BEEN A MEMBER AND YOUR CURRENT STANDING WITH THE ORGANIZATION.

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REFERENCES

PROVIDE FOUR REFERENCES, NOT RELATED BY BLOOD OR MARRIAGE, WHO HAVE KNOWN YOU FOR FIVE YEARS OR LONGER
NO MORE THAN TWO REFERENCES MAY BE CURRENT MEMBERS OR EMPLOYEES OF SPRING HILL

NAME _____ PHONE _____

ADDRESS _____

RELATIONSHIP _____ YEARS KNOWN _____

NAME _____ PHONE _____

ADDRESS _____

RELATIONSHIP _____ YEARS KNOWN _____

NAME _____ PHONE _____

ADDRESS _____

RELATIONSHIP _____ YEARS KNOWN _____

NAME _____ PHONE _____

ADDRESS _____

RELATIONSHIP _____ YEARS KNOWN _____

SUPPLEMENTAL STATEMENT

I declare, subject to the penalties of perjury, that the statements made in this application (including any statements made in any accompanying attachments) have been examined by me, and to the best of knowledge are true and correct. Furthermore, I acknowledge the obligation on my part, if accepted for membership in the Spring Hill Community Ambulance Corps (henceforth 'the Corps'), to obey the rules and regulations of the Corps and submit to the authority of the elected officers of the Corps. In connection with the application, I authorize all corporations, companies, credit agencies, educational institutions, persons, law enforcement agencies, military services, financial institutions, doctors, hospitals, and employers, to release any and all information that they may have about me to any officer of the Corps as permitted by law, and release them from any responsibility or liability for doing so. Furthermore, I authorize the Corps to procure an investigative report about me. I understand that such report may contain information about my background, character, and personal reputation.

PRINT NAME _____ DATE _____

SIGNATURE _____

It is the policy of Spring Hill Community Ambulance Corps, Inc. that membership be based on merit, qualifications, and competence, and that membership decisions be made without regard to any party's race, color, age, sex, religion, national origin, citizenship, marital status, disability, veteran status, or any other basis prohibited by federal, state, or local law. This policy extends to every phase of the membership process including (but not limited to) recruiting, training, promotion, compensation, benefits, transfers, discipline, and expulsion.

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Consumer Report Disclosure and Release

Spring Hill Community Ambulance Corps

Disclosure and Release

As part of the employment or membership process, Spring Hill Community Ambulance Corps, Inc. ("the Corps"), will obtain a consumer report, which I understand may include information regarding my character, general reputation, personal characteristics, or mode of living.

During the application process and at any time during the tenure of my employment or membership with the Corps, I hereby authorize ChoicePoint Workplace Solutions, Inc., on behalf of the Corps, to procure a consumer report, which I understand may include information regarding my character, general reputation, personal characteristics, or mode of living. This report may be compiled with information from courts' record repositories, departments of motor vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification, to the extent such investigation includes information bearing on my character, general reputation, personal characteristics, or mode of living.

Applicant Name

Applicant Signature

Social Security Number

Date of Birth



MVR Inquiry Disclosure and Release

Spring Hill Community Ambulance Corps

Disclosure and Release

In connection with my application for employment (including contract for services) or membership with Spring Hill Community Ambulance Corps:

I understand that consumer reports, which may contain public record information, may be requested and obtained. These reports may include information related to my previous driving record including court actions, citations, license suspensions, and license revocations.

I authorize without reservation, any party or agency contacted to furnish the above-mentioned information.

I have the right to obtain information as to the name, address, and phone number of any agency providing such information. Furthermore, I may request of that agency, upon proper identification, the nature and substance of all information in its files on me at the time of my request, including all sources of information as well as the recipients of any reports on me which that agency has previously furnished within the two (2) year period preceding my request.

This authorization shall remain on file and shall serve as ongoing authorization for Spring Hill Community Ambulance Corps to procure Motor Vehicle Reports at any time during my employment, membership, or contract period.

Signature

Date

Print Name

Social Security #

Driver License #

State



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*Para informacion en espanol, visite www.ftc.gov/credit
o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.*

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identify theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.



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- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below.	Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word “National” or initials “N.A.” appear in or after bank’s name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word “Federal” or initials “F.S.B.” appear in federal institution’s name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words “Federal Credit Union” appear in institution’s name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board of Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator – GIPSA Washington, DC 20250 202-720-7051



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**NEW YORK CORRECTION LAW
ARTICLE 23-A
LICENSURE AND EMPLOYMENT OF PERSONS
PREVIOUSLY CONVICTED OF ONE OR MORE CRIMINAL OFFENSES**

SS 750. Definitions. For the purposes of this article, the following terms shall have the following meanings:

- (1) "Public agency" means the state or any local subdivision thereof, or any state or local department, agency, board or commission.
- (2) "Private employer" means any person, company, corporation, labor organization or association which employs ten or more persons.
- (3) "Direct relationship" means that the nature of criminal conduct for which the person was convicted has a direct bearing on his fitness or ability to perform one or more of the duties or responsibilities necessarily related to the license, opportunity, or job in question.
- (4) "License" means any certificate, license, permit or grant of permission required by the laws of this state, its political subdivisions or instrumentalities as a condition for the lawful practice of any occupation, employment, trade, vocation, business, or profession. Provided, however, that "license" shall not, for the purposes of this article, include any license or permit to own, possess, carry, or fire any explosive, pistol, handgun, rifle, shotgun, or other firearm.
- (5) "Employment" means any occupation, vocation or employment, or any form of vocational or educational training. Provided, however, that "employment" shall not, for the purposes of this article, include membership in any law enforcement agency.

SS 751. Applicability. The provisions of this article shall apply to any application by any person for a license or employment at any public or private employer, who has previously been convicted of one or more criminal offenses in this state or in any other jurisdiction, and to any license or employment held by any person whose conviction of one or more criminal offenses in this state or in any other jurisdiction preceded such employment or granting of a license, except where a mandatory forfeiture, disability or bar to employment is imposed by law, and has not been removed by an executive pardon, certificate of relief from disabilities or certificate of good conduct. Nothing in this article shall be construed to affect any right an employer may have with respect to an intentional misrepresentation in connection with an application for employment made by a prospective employee or previously made by a current employee.

SS 752. Unfair discrimination against persons previously convicted of one or more criminal offenses prohibited. No application for any license or employment, and no employment or license held by an individual, to which the provisions of this article are applicable, shall be denied or acted upon adversely by reason of the individual's having been previously convicted of one or more criminal offenses, or by reason of a finding of lack of "good moral character" when such finding is based upon the fact that the individual has previously been convicted of one or more criminal offenses, unless:

- (1) there is a direct relationship between one or more of the previous criminal offenses and the specific license or employment sought or held by the individual; or
- (2) the issuance or continuation of the license or the granting or continuation of the employment would involve an unreasonable risk to property or to the safety or welfare of specific individuals or the general public.

SS 753. Factors to be considered concerning a previous criminal conviction; presumption.

- (1) In making a determination pursuant to section seven hundred fifty-two of this chapter, the public agency or private employer shall consider the following factors:
 - (a) The public policy of this state, as expressed in this act, to encourage the licensure and employment of persons previously convicted of one or more criminal offenses.
 - (b) The specific duties and responsibilities necessarily related to the license or employment sought or held by the person.

Spring Hill Community



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- (c) The bearing, if any, the criminal offense or offenses for which the person was previously convicted will have on his fitness or ability to perform one or more such duties or responsibilities.
 - (d) The time which has elapsed since the occurrence of the criminal offense or offenses.
 - (e) The age of the person at the time of occurrence of the criminal offense or offenses.
 - (f) The seriousness of the offense or offenses.
 - (g) Any information produced by the person, or produced on his behalf, in regard to his rehabilitation and good conduct.
 - (h) The legitimate interest of the public agency or private employer in protecting property, and the
 - (i) safety and welfare of specific individuals or the general public.
- (2) In making a determination pursuant to section seven hundred fifty-two of this chapter, the public agency or private employer shall also give consideration to a certificate of relief from disabilities or a certificate of good conduct issued to the applicant, which certificate shall create a presumption of rehabilitation in regard to the offense or offenses specified therein.

SS 754. Written statement upon denial of license or employment. At the request of any person previously convicted of one or more criminal offenses who has been denied a license or employment, a public agency or private employer shall provide, within thirty days of a request, a written statement setting forth the reasons for such denial.

SS 755. Enforcement.

- (1) In relation to actions by public agencies, the provisions of this article shall be enforceable by a proceeding brought pursuant to article seventy-eight of the civil practice law and rules.
- (2) In relation to actions by private employers, the provisions of this article shall be enforceable by the division of human rights pursuant to the powers and procedures set forth in article fifteen of the executive law, and, concurrently, by the New York city commission on human rights.



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HEALTHCARE PROVIDER CERTIFICATION

PERSONAL DATA

COMPLETE THIS SECTION PRIOR TO PROVIDER VISIT - LEAVE NO ITEM INCOMPLETE

NAME _____
LAST FIRST MI

HOME PHONE _____ DATE OF BIRTH _____

ALLERGIES _____ ☎ NONE

VITAL SIGNS

PULSE _____ RESP _____ TEMP _____

BP _____ HGT _____ WGT _____

VISUAL ACUITY

WITHOUT GLASSES		WITH GLASSES	
RIGHT	LEFT	RIGHT	LEFT
/	/	/	/

KNOWN CHRONIC CONDITIONS OR OTHER MEDICAL RESTRICTIONS

PHYSICAL EXAMINATION

	UNREMARKABLE	COMMENTS/PERTINENT FINDINGS
EYES	Y	
EARS	Y	
NOSE	Y	
THROAT	Y	
NECK	Y	
LUNGS	Y	
HEART	Y	
ABDOMEN	Y	
BACK/SPINE	Y	
EXTREMITIES/ JOINTS	Y	
NEUROLOGIC	Y	
GENITALIA/ HERNIA*	Y	

*if indicated

PROVIDER CERTIFICATION

I have reviewed the candidate's medical history and performed a physical examination of the candidate, and my professional recommendation is as follows:

Y **CLEARED WITHOUT RESTRICTION.** There is no medical reason that the candidate should not:

- Lift, carry and/or balance 125 pounds (250 pounds with assistance)
- Remain unaffected by loud noises and/or bright or flashing lights
- Demonstrate good manual dexterity
- Bend, stoop, and/or crawl on uneven terrain
- Withstand variable environmental conditions, such as heat, cold, and moisture
- Work in low-light conditions or confined spaces

Y **NOT CLEARED.** The candidate is not recommended for work duty because:

SIGNATURE _____ PRINT _____

Y MD Y DO Y LNP Y PA

TEL NO _____ DATE OF EXAM _____