

# Cave Spring Rescue Squad Observer Form

Full Name \_\_\_\_\_ D.O.B \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ SSN \_\_\_\_\_

Emergency Contact Person and Relationship to you \_\_\_\_\_

Emergency Contact Numbers \_\_\_\_\_

## Observer Release and Indemnification Agreement

This release and indemnification agreement, made this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
By and between \_\_\_\_\_ of \_\_\_\_\_ Virginia,  
and Cave Spring Rescue Squad, Inc.

### Witnesseth:

That for and in consideration of the sum of one dollar, receipt of which is hereby acknowledged, and in further consideration of the permission granted to me by the Cave Spring Rescue Squad, Inc., Roanoke County, Virginia to participate in its activities, including but not necessarily limited to training and responded to requests for routine and emergency services, I hereby release and indemnify the Cave Spring Rescue Squad, Inc., and Roanoke County Board of Supervisors, and Roanoke County Fire and Rescue Department, its members, agents and employees from all actions, causes of actions, damages, claims or demands which I, my heirs, executors, administrators, or assigns may have against Cave Spring Rescue Squad, Inc. and other above described parties for any personal injury and/or property damage known or unknown which may result from my participation in the above described activities. I recognize and acknowledge that said activities involve risk to my person and property and I knowingly assume all such risk.

I, the undersigned, am over/under the age of eighteen years of age, have read this release and understand all its terms. I execute it voluntarily and with full knowledge of its significance. This release and agreement shall remain in effect for 90 days, or until revoked by me or an authorized agent of Cave Spring Rescue Squad, Inc.

In Witness whereof, I have executed this release on the day and year first above set forth at Roanoke, VA.

Date \_\_\_\_\_ Printed Name \_\_\_\_\_ Signature \_\_\_\_\_

Parent's Signature if Observer is a minor \_\_\_\_\_

Chief or Deputy Chief's Signature \_\_\_\_\_ Date \_\_\_\_\_

# Cave Spring Rescue Squad

## Criminal Record Acknowledgement

A criminal record will prevent an applicant from becoming a member of Cave Spring Rescue Squad, or any other Roanoke County Fire and Rescue Volunteer Organization. You must sign this form and return it with a completed Observer form to be eligible to become an Observer with Cave Spring Rescue Squad. Withholding or falsification of this information will be sufficient cause for rejection or revocation of the Observer Status or **subsequent membership**.

To be eligible to become an Observer you are required to meet and maintain the following qualifications:

Have **NEVER** been convicted of a felony involving any sexual crime

Not be convicted of any other act which is a felony under the laws of the Commonwealth of Virginia or of the United States, except that such felon is eligible to become an Observer 5 years after the date of final release and no additional felonies have been committed.

I affirm that I have never been convicted of a felony involving any sexual crime. I further affirm that I have not been convicted of any other felony under the laws of the Commonwealth of Virginia or of the United States of America within the last 5 years. Individuals convicted of non-sex related felony crimes are eligible for Observer status 5 years after their date of final release from the criminal justice system.

Printed Name: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Parents Signature: \_\_\_\_\_

(If applicant is under 18)



<b>POLICY SECTION:</b> Administration	<b>NUMBER:</b> A-01-14	<b>PAGES:</b>
<b>SUBJECT:</b> Citizen Observer Program		<b>APPLICABLE TO:</b> All Personnel
<b>EFFECTIVE DATE:</b> October 1, 2004	<b>REVIEW DATE:</b> October 2021	<b>REVISED DATE:</b> 03/11/2020

Stephen G. Simon  
Fire and Rescue Chief

This policy is for departmental use only and shall not apply in any criminal or civil proceedings. The Departmental policy should not be construed as a creation of a higher legal standard of safety or care in an evidentiary sense with respect to third party claims. Violations of this directive will be the basis for departmental administrative sanctions. Violations of law will form the basis for departmental administrative sanctions. Violations of law will form the basis for civil and criminal sanctions in a recognized judicial setting.

**I. PURPOSE**

The purpose of the Citizen Observer Program is to promote understanding of the responsibilities and achievements of the Roanoke County Fire & Rescue Department in any given day.

**II. POLICY**

The Citizen Observer Program allows citizens, as well as county employees, to gain a realistic and comprehensive view of the duties of fire and rescue personnel. The Department will grant program participation without regard to age (other than minors under the age of 16), race, sex, religion, creed, or national origin.

**III. PROCEDURE**

**A. Eligibility/Application**

1. Observers must demonstrate a strong interest in pre-hospital care or firefighting and in joining Roanoke County Fire & Rescue Department either as a volunteer or career member. Observers must be at least 16 years of age at the time of application and must have approval from their parent/guardian if they are 16 or 17 years of age. Special circumstances may be made for public officials, administrators, media, etc. to observe as circumstances permit.
2. All Citizen Observers must first complete a Citizen Observer & Waiver Form (attached). The form should be submitted to the Volunteer Chief of the organization the applicant wishes to ride with, or Administration Office for those wanting to ride with a career unit.

3. A complete and current Citizen Observer & Waiver Form for each observer must be on file with RCFRD Administration Office. Each form will be good for 90 days. In appropriate cases, the form may be continued for a maximum of 120 days of total observation period.
4. Each observer must have a standard criminal history record completed through the Volunteer Office before they are cleared to observe. The criminal history must meet the RCFRD guidelines to participate. Felony convictions or convictions involving moral turpitude will be grounds for disqualification. Other convictions may be grounds for disqualification on a case-by-case basis. The criminal history must be completed within 30 days prior to the first scheduled ride along.
5. No persons will be allowed to use this Citizen Observer Program to fulfill court-ordered community service time.
6. No citizen observer shall carry a weapon of any kind while on county property or while riding on apparatus.

#### **B. Officer-in-Charge Responsibilities**

1. The officer in charge may terminate any or all of the observer's privileges at any time for any reason.
2. The officer in charge has full and final approval as to who is permitted on the apparatus. The Officer in Charge may choose to run a call without the observer for any reason. Alternately, an observer may choose not to run a call for any reason.
3. NO observer shall ever be left in the building unattended. If the observer does not go on the call, the observer will be asked to leave the station and escorted from the building. If the team goes to dinner, etc., the observer should be asked to attend. If the observer declines the invitation, they will be asked to leave and return after the team comes back from their destination.

#### **C. Participant Conduct/Responsibilities**

1. Observers must wear appropriate clothing. Sandals, shorts, tank tops, sweatshirts, flip-flops, soiled clothing or clothes with holes are not appropriate clothing. The observer should be dressed appropriately for the weather (if it is cold, bring a coat, etc.) No shirts or other clothing with logos that are disrespectful, derogatory, or involve themes of a sexual nature, drugs or alcohol will be allowed. It is recommended that women not wear skirts or dresses. The Officer in Charge will make the final decisions involving clothing.
2. Observers are not permitted to wear ANY crew identification, i.e. coats, shirts, bunker gear. There will be NO EXCEPTIONS. Observers WILL NOT use the radios in the units, RCFRD/crew cellular phones, or operate ANY emergency systems (lights, sirens, squad equipment, etc.)
3. Observers who currently hold ANY certification will not be allowed to practice any skills while under observer status. Observers who hold no certifications will not be allowed to perform ANY EMS or firefighting activity.
4. Observers are not allowed to operate any county insured vehicles.

5. The observer is under the direction of Officer in Charge at all times. While on the scene, the observer is under the direction of the incident commander.
6. Observers must follow all directions of the officer in charge. No interference with patient care, scene command, safety, or normal operation of the crew will be permitted. Failure of the observer to promptly and fully comply with all directions of the Officer in Charge will result in immediate suspension from the program.
7. Observers are required to conduct themselves in a mature and respectful manner at all times--whether in the building, out to eat, on calls, etc.
8. Observers who are asked to identify themselves at any time should reply by saying that they are an observer, and they are to make no statements to anyone regarding patient care, fire scene or any operations. The Officer in Charge should make every effort to identify the observer to the patient, their family, or any other fire, rescue, police officer.
9. No Observer is to respond to the scene of any call in a personally owned or operated vehicle. This does not preclude an individual's obligation to stop and attempt to render aid if they are the first on the scene of a wreck, etc. No Observer is to run ANY calls unless they are in the building with the Officer in Charge's permission and assigned to a team for the duration of a shift.
10. The Observer must wear proper identification, as determined by the Officer in Charge, so as to be easily recognized by all citizens and Roanoke County personnel. Observer identification must be worn on the outside of all clothing and must be visible at all times, whether in the building, out to eat, on a call, etc.

**D. Roanoke County Communication Officers**

1. On-duty Communication Officers will be guided by the procedures contained in the Communication Center Handbook.
2. Communications Officers will submit to the Roanoke County Fire & Rescue Administrative Office a copy of the Fire & Rescue Citizen Observer Form for scheduling and tracking purposes. A copy of the form will also be given to the Communications Shift Supervisor for their tracking purposes.
3. Communication officers-in-training during work hours will have assigned times to participate in the Citizen Observer Program. They will be assigned by Fire & Rescue Administration.
4. When riding, Communication Officers will wear appropriate civilian attire. Should a question arise, appropriate attire will be determined by the Officer in Charge.
5. Communication Officers who are asked to identify themselves will identify themselves as a Roanoke County Communication Officer.

# Roanoke County Fire & Rescue Department

## Citizen Observer Program Application & Waiver Form

The Citizen Observer Program is designed to allow citizens to gain a realistic view of the fire and rescue operations of Roanoke County Fire & Rescue Department. It is our hope that the insight gained by participating in this program will be both informative and enjoyable. The following information is required to begin the application process. Fill out all three pages of this form. **Please note that Name, Sex, Race and Social Security Number are all required for Roanoke County Fire & Rescue Department to process the background check.**

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Sex: Male / Female Race: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Complete Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

If Student- Name of School Attending: \_\_\_\_\_

**PERSON TO NOTIFY IN CASE OF EMERGENCY:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_

Do you have any medical condition that might affect your ability to participate in this program? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, explain: \_\_\_\_\_

Are you a member of a Fire/Rescue Organization? \_\_\_\_\_

If so, which one: \_\_\_\_\_

Are you participating in a Fire/Rescue Training Program? \_\_\_\_\_

If so, what type of training? \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_ If yes, explain \_\_\_\_\_

**Date/Hours requested to observe:** Date: \_\_\_\_\_ Time: \_\_\_\_\_

Please plan your observation time at least 24 hours from the date of this application for planning purposes.

