



APPLICATION FOR SEARCH AND RESCUE

Please print all information. Application must be filled out **completely** and **signed**. Return to DCSAR, PO Box 1306, Minden, NV 89423, or email to dcsar@douglasnv.us.

Date: _____

First Name: _____ Middle Name: _____ Last Name: _____

Date of Birth: _____ Email: _____

Mailing Address: _____

Physical Address: _____

Contact Numbers:

Home: _____ Cell: _____ Work: _____

Driver's License No.: _____ State: _____ Class: _____

Current/Most Recent Employer: _____

Occupation: _____

Work Address: _____

Emergency Contact: _____

Home Phone: _____ Cell Phone: _____

Relation: _____ Home Address: _____

Please list any foreign languages you speak:

_____ Fluent. Good Fair

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1. Have you ever been arrested, detained, or convicted of any offense? No Yes

2. Have you ever received a traffic citation for a moving violation? No Yes

3. Have you ever had your driving privileges suspended or revoked for any reason? No Yes

4. Have you been a member of any other Search and Rescue group in the past? No Yes

If yes, Name of Group: _____ Length of Membership: _____

If you answered yes to question 1 or 3, please attach a separate piece of paper describing in detail the circumstances. Include locations, dates, involved enforcement agencies and or court jurisdictions. Print your name on all additional pages and be sure to reference your response to the correct question.

Because search and rescue field work can be a strenuous physical activity, we strongly urge all prospective members to seek the advice of a physician before joining. The following questions are for our information only and do not have any bearing on your acceptance as a member.

Do you currently have any physical illness or disabilities of which we should be aware of? No Yes
(Diabetes, heart problems, allergies, etc.)

If Yes, please explain: _____

If you answered yes to the above, do you currently take any prescription medications for these illnesses or disabilities? No Yes

If Yes, please specify: _____

Please check all areas of training you currently have:

- | | | |
|------------------------------------|--|---|
| <input type="checkbox"/> First Aid | <input type="checkbox"/> High Angle Rescue | <input type="checkbox"/> Water Survival |
| <input type="checkbox"/> EMT-B | <input type="checkbox"/> EVOC Driving Course | <input type="checkbox"/> USCG Boat Course |
| <input type="checkbox"/> EMT-1 | <input type="checkbox"/> Man Tracking | <input type="checkbox"/> Swift Water Rescue |
| <input type="checkbox"/> EMT-P | <input type="checkbox"/> ELT Location | <input type="checkbox"/> SCUBA, Level _____ |
| <input type="checkbox"/> Nurse | <input type="checkbox"/> Map & Compass | <input type="checkbox"/> Desert Survival |
| <input type="checkbox"/> Doctor | <input type="checkbox"/> NASAR SAR Tech, Level _____ | <input type="checkbox"/> Mountain Survival |
| <input type="checkbox"/> CPRPP | <input type="checkbox"/> Avalance | <input type="checkbox"/> Winter Survival |

Do you own your own aircraft? No Yes Pilot License No.: _____

List any other training that you have had that may assist you in Search and Rescue:

I am applying for: Rescue Member Rescue Support Member Admin Support Member

If applying for Admin Support Member, please specify the areas that you are interested in helping with, or the jobs you are interested in doing: _____

I, the undersigned, certify that the above information is true and complete to the best of my knowledge. I understand that the provision of false, misleading, or inaccurate information may result in the denial or termination of membership from Douglas County Sheriff's Search and Rescue.

Signature of Applicant

Date



Name: _____

Date: _____

Thank you for your interest in joining Douglas County Search and Rescue.

In addition of the skills involved in searches and rescues which you will be taught in our academy, there are other skills that help us keep our organization in top condition. From the skills listed below, please rank the top 4 areas where you would be able to assist (in order of importance to you).

- _____ Administrative/Leadership Skills
- _____ Accounting
- _____ Aviation
- _____ Computer Skills
- _____ Computer Presentations (PowerPoint)
- _____ Electronics
- _____ Equipment Maintenance
- _____ Fund Raising
- _____ Grant Writing
- _____ Graphics
- _____ Medical Skills
- _____ Outdoor/Mountain Skills
- _____ Photography (including use of digital imaging software)
- _____ Public Speaking, Presentation
- _____ Vehicle Maintenance
- _____ Webmaster

If you have other skills that you think would benefit DCSAR, please list them below.
