



DUNN LORING VOLUNTEER FIRE AND RESCUE DEPARTMENT
2148 GALLOWS ROAD · P.O. BOX 13
DUNN LORING, VA 22027
703/560-9413 VOICEMAIL · 703/560-9155 FAX
WWW.DLVFRD.ORG

Dear Prospective Member,

Thank you for your interest in becoming a member of the Dunn Loring Volunteer Fire and Rescue Department (DLVFRD). The level of commitment required for our members is unlike any other volunteer organization but you will find that the rewards are equally unique and satisfying. This letter briefly describes the membership categories and the basic requirements for our members. You are encouraged to contact us to learn more about our role in the community and the level of commitment expected of our members before you commit your time and talent to your community by becoming an active member of our department.

Fairfax County is a combination system made up of 37 fire and rescue stations strategically positioned throughout Fairfax County's 399 square miles. It operates on three separate 24-hour rotating shifts of approximately 1,200 career uniformed men and women. There are 12 associated volunteer departments within the county. Over 300 operational volunteers provide support through supplemental up-staffing of the emergency units, fundraising, and administrative duties. DLVFRD is a Chartered 501(c)(3) non-profit corporation within the Commonwealth of Virginia that has a Board of Trustees as its governing structure.

DLVFRD has four categories of membership: Auxiliary, Associate, Administrative, and Operational. All applicants must be at least 18 years of age, possess a high school diploma or equivalent, undergo a background investigation and complete an application for consideration.

Auxiliary members are full members of the department and follow their own bylaws. Their mission is twofold: to provide frontline canteen service to the emergency services personnel of Fairfax County, and to support the department in fundraising, community outreach and administrative support.

Associate and **Administrative** members both contribute to the Department by fulfilling an administrative position, the only difference is the more structured commitment level of the Administrative member. Associate members have a flexible schedule and are asked to actively fulfill an administrative role. Administrative members are required to attend monthly meetings and work bingo crew once every four weeks. They are also required to actively fulfill an administrative role and attend the annual community outreach events.

Operational members are emergency medical technicians (EMTs) and firefighters. In addition to supplementing our career staff by up-staffing the frontline units and by putting reserve units in service; operational members also devote their time by fulfilling administrative positions. Operational members must be able to pass a physical examination. Firefighter candidates must also be able to pass a physical ability test prior to enrolling in fire school. Operational members are required to attend monthly meetings, work bingo once every four weeks, put in 20 hours of operational time each month, and attend 48 hours of training per year. Operational members are also required to actively support administrative duties and attend the annual community outreach events.

Thank you once again for your interest in becoming a member of the Dunn Loring Volunteer Fire and Rescue Department. Please contact me with any questions to find out if your goals match our volunteer opportunities. We look forward to working with you in the future.

Sincerely,

Human Resources Office
Dunn Loring Volunteer Fire and Rescue Department
hr@dlvfrd.org



DUNN LORING VOLUNTEER FIRE AND RESCUE DEPARTMENT

APPLICATION FOR MEMBERSHIP

Please read and sign:

I, _____ hereby make application for membership in the Dunn Loring Volunteer Fire and Rescue Department. In connection with this application, I authorize the department to conduct a background investigation and authorize any person named herein and any law enforcement agency to release information that may be pertinent to such investigation. I affirm that all statements contained herein are true and complete. I understand that any false statement made is grounds for denial of this application or dismissal from the department. If accepted as a member, I agree to abide by all rules and regulations of the Dunn Loring Volunteer Fire and Rescue Department and of the Fairfax County Fire and Rescue Department.

Signature of applicant

Date

For your membership application to be complete, you must:

_____ Provide all information requested in this application including signature

_____ Obtain your official driving record covering the last five (5) years

Virginia driving records may be obtained at any DMV office in person. To do so, you must fill out a Transcript of Record Form (available at the DMV), present some form of identification, and pay a small fee. For local DMV locations call 703.761.4655. You may also obtain a copy of your driving record online. Follow instructions from www.dmv.state.va.us under Record Services in the Citizens Services Area.

_____ Present your driver's license for verification

_____ Present your Social Security card for verification

How did you hear about us? _____

PERSONAL INFORMATION

Name: _____ Date of Birth: _____
(First, MI, Last) Social Security Number: _____

Address: _____ How long at current
City, State, Zip: _____ residence?: _____

Telephone Number: _____ Cell phone Number: _____

Email Address: _____

EMERGENCY CONTACT INFORMATION

Name: _____ Relationship: _____

Address: _____ Work Phone: _____

City, State, Zip: _____ Home Phone: _____

MEMEBERSHIP CATEGORY AND AREA OF INTEREST

Which membership category of the department do you have an interest in pursuing?

ADMINISTRATIVE ASSOCIATE OPERATIONAL
(Please check Operational area of interest)
 EMERGENCY MEDICAL TECHNICIAN (EMT)
 FIRE SUPPRESSION (Firefighter/EMT)

Which administrative area(s) of the department do you have an interest in pursuing? (applies to ALL members)

- | | |
|--|---|
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Information Technology |
| <input type="checkbox"/> Human Resources | <input type="checkbox"/> Webmaster |
| <input type="checkbox"/> Community Outreach | <input type="checkbox"/> Social Committee Coordinator |
| <input type="checkbox"/> Buildings & Grounds Maintenance | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Public Relations | <input type="checkbox"/> Birthday Party Coordinator |
| <input type="checkbox"/> Treasury / Accounting | <input type="checkbox"/> Life Safety Education |
| <input type="checkbox"/> Historian | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Bingo Crew | <input type="checkbox"/> Other _____ |

FIRE FIGHTING/EMS EXPERIENCE

Have you ever been a member of a volunteer or paid fire department, rescue squad or ambulance corps or similar organization?

_____ YES _____ NO If YES, please complete the following:

Organization: _____ How Long: _____

Address: _____ Supervisor: _____

City, State, Zip: _____ Supervisor's Telephone: _____

Date you entered the organization: _____ Date you left: _____

Reason for leaving: _____

Rank or Positions Held: _____

If you have been affiliated with more than one such organization, check this box [] and provide for each the same information called for above by writing it on the back of this page.

Please list any fire service or emergency medical service type training you have completed (e.g., Emergency Medical Technician, Fire Science course, etc.). Give expiration dates for any training certificates that you hold.

Please tell us briefly why you would like to become a member of the Dunn Loring Volunteer Fire & Rescue Department:

EMPLOYMENT HISTORY

List below all previous employers in last 5 years starting with most current: (use back of page if necessary)

Current Employer:	_____	How long:	_____
Address:	_____	Occupation:	_____
City, State, Zip:	_____	Supervisor:	_____
Business Telephone:	_____	Supervisor's Telephone:	_____
Employer:	_____	How long:	_____
Address:	_____	Occupation:	_____
City, State, Zip:	_____	Supervisor:	_____
Business Telephone:	_____	Supervisor's Telephone:	_____

REFERENCES

Please list three character references other than employers:

Name:	_____	Occupation:	_____
Address:	_____	Work Phone:	_____
City, State, Zip:	_____	Home Phone:	_____
Interviewer's Notes:	_____		

Name:	_____	Occupation:	_____
Address:	_____	Work Phone:	_____
City, State, Zip:	_____	Home Phone:	_____
Interviewer's Notes:	_____		

Name:	_____	Occupation:	_____
Address:	_____	Work Phone:	_____
City, State, Zip:	_____	Home Phone:	_____
Interviewer's Notes:	_____		

MILITARY HISTORY

Have you ever served in the military forces of the United States? (including the Reserves or National Guard)

_____ YES _____ NO If YES, please complete the following:

Branch of Service: _____ Serial Number: _____
Dates of Service: _____ Highest Rank: _____
Discharge Location: _____ Type of Discharge: _____

EDUCATION HISTORY

High School: _____ Year of Graduation: _____
College: _____ Number of years: _____
Degree: _____ Year of graduation: _____
College: _____ Number of years: _____
Degree: _____ Year of graduation: _____
Other certifications: _____

CRIMINAL HISTORY

Have you ever been charged with or convicted of any misdemeanor or felony offense within the last 10 years?

_____ YES _____ NO If YES, please complete the following:

Describe the nature of the offense, dates charged and convicted law enforcement agency involved, the jurisdiction, and disposition of case:

Have you ever been charged with or convicted of any moving traffic violation within the last 10 years?

_____ YES _____ NO If YES, please complete the following:

Describe the nature of the offense, dates charged and convicted, law enforcement agency involved, the jurisdiction, and disposition of case:

