Dear Prospective Member,

Thank you for your interest in applying for membership at the Ashburn Volunteer Fire Rescue Department (AVFRD). The enclosed handout will provide you with an overview of the department and a basic outline of the membership process and requirements.

Please do note that due to safety and communication concerns, the Commonwealth of Virginia requires you to be fluent in English to take firefighter or EMT classes.

On the last Tuesday of every month, there will be a new members meeting at the Station 6 at 20688 Ashburn Rd. starting at 7:00pm. Anyone interested in becoming a member is encouraged to attend. We encourage you to bring your spouse or significant other. Prospective junior members (ages 16 & 17) must have a parent or guardian come with them. During this meeting, all paperwork necessary for membership will be completed. This is also an excellent opportunity to learn more about our station and ask any questions you may have about joining.

Bring a copy of your driver’s license and Social Security card.

Once again, thank you for your interest. We look forward to meeting you at our membership meeting.

Sincerely,
Loring Dixon
Membership Committee Chair
ldixon@avfrd.net
703-554-9824
Introduction to the Applicant

Overview

The AVFRD is an independent and private incorporation that follows National, State and County Fire and Rescue guidelines. The AVFRD works hand-in-hand with Loudoun County Fire-Rescue, but is not owned by or run by Loudoun County. The AVFRD receives some monetary funding from Loudoun County, but most of our budget comes from fund-raisers and donations. Previously, a large source of support came from the proffer system, but as of July 1, 2001, the proffer system was discontinued.

The Ashburn community is growing rapidly. There are currently more than 45,000 households in the Ashburn community with several thousand more being built over the next five years alone.

History

Previously named “Ashburn Volunteer Fire Department”, the Ashburn Volunteer Fire and Rescue Department (AVFRD) was founded in 1945 after a fire killed three children in Sterling, Virginia. At that time, the closest fire department was in Herndon, Virginia. The citizens of Ashburn decided that this situation was unacceptable and decided to start their own fire department. The AVFRD decided to add an ambulance service to its ranks in 1991.

Response Area

Our response area (also called first due) encompasses approximately 26 square miles. We are bound by the Potomac River to our north, Goose Creek/River Creek to our west and Broad Run to our east. Our southern border ends roughly in the vicinity of Ryan Road. Our first due presents us with a variety of buildings, businesses and terrain to cover and requires a wide range of equipment to manage all of the possible emergencies.

Probationary Members

After the application process is completed, all members must attend and complete the Volunteer Recruit School (VRS) training prior to becoming active operational members, regardless of current certifications or skill levels. The training will orient the new member to station history, station operational procedures, communications, ambulance operations and fire behavior. The prospective member will also be introduced to all apparatus and it’s equipment. Training schedules will be posted on the NEW RECRUIT TRAINING board. Administrative members are required to attend the class sessions on station history, station operational procedures and communications. Administrative members are encouraged to participate in CPR training. This period will also include a 6-month service requirement.
Duty Crews

The Operational Staff in Ashburn is comprised of both career and volunteer members. The career staff covers the Monday through Friday, 6:00 a.m. to 6:00 p.m. shift, as well as covering a 24-hour ALS (Advance Life Support) crew. Volunteers are responsible for covering nights and weekends.

To ensure coverage at all times, we have duty crews that run Sunday night through Friday night. Saturdays are covered on a rotating basis by the Sunday through Friday volunteer staff. After VRS training, you will be assigned to a duty crew.

Each member is required to participate in some of the other events that provide interaction with the community and help us raise funds to support our department. These events include, but are not limited to: Pancake breakfasts, Community “stand bys and public service events,” spring and fall Open House and special dinners. All operational members are required to have at least 24 hours of “non-emergency time” per year to become and remain a voting member.

Operational Members

Operational members will be cleared to ride any apparatus after the completion of the VRS TRAINING but are considered “red hats” (a term used to designate a new operational member) until they have completed either Firefighter 1 or EMT-B. All mandated training is provided at no cost to the AVFRD member.

All Operational members must obtain a Haz-Mat Operations and Health Care Provider CPR certification prior to attending any firefighter training. EMT training requires at least Haz-Mat awareness as a prerequisite. First Responder is also a prerequisite for anyone attending Firefighter 1. In addition, all operational members must attend County Orientation.

All classes listed above are offered at the Fire-Rescue training center in Leesburg at no cost.

An EMT-B from another area may obtain reciprocity from Office of Emergency Services in Richmond (1-800-523-6019). However, any EMT new to Loudoun County must attend a Loudoun County BLS Protocols and skills verification classes.

Junior Members

Junior members must be at least 16 years old and must follow the same requirements as outlined above. Junior members must maintain a 2.0 or better GPA and not be failing any class in order to maintain his/her status. Junior members are required to provide a copy of their most recent report card at the time of application. A junior member may
only remain at the station until 10:00 p.m. on any school night and 11 PM on the weekend.

**Explorer Post**

Explorer Post 1666 comes under the umbrella of the Boy Scouts of America “Life for Learning” program. The program is co-ed. Young girls and boys who are at least 14 years old and have finished the eighth grade are eligible to join. The purpose of the Fire-Rescue Explorer Post is to expose teenagers from ages 14-21 to fire/rescue services. The Explorer participates in the training that is similar to VRS Training and performs other station duties. Grade point average and station rules apply as above.

**Administrative Members**

Administrative members are the backbone of the AVRFD. They assist with planning, as well as participate in department fund-raisers (i.e. pancake breakfasts, Photo fund drive, etc.) and department sponsored events such as Open House and community education. There are many other tasks such as equipment maintenance, marketing, bookkeeping and public relations. These tasks will be assigned either by the President of AVFRD or the Chairpersons of the committees working under the President’s direction. All contributions of time and involvement are greatly needed and deeply appreciated. Training requirements are outlined under the probationary member section. Administrative members are required to provide 120 hours of volunteer time per year.

**Membership Benefits**

Members are eligible for numerous benefits as part of the volunteer system. Points are accrued based on your activity level within the department. Based on the number of points earned per year, members are eligible for the following:

- Fire/Rescue tag privileges
- One (1) free county sticker worth $25.00
- Personal property tax waiver for one vehicle per member (applicable for Loudoun County residents only)
- No rental fee for the use of the social hall. Cleaning fees are not exempt
- Loudoun County Credit Union membership
- Tuition Reimbursement for fire/rescue course
- Retirement Program
Please detach and return only this portion

ASHBURN VOLUNTEER
FIRE & RESCUE DEPARTMENT
20688 Ashburn Road, Ashburn, Virginia 20147

To whom it may concern:

Attached is my application for membership with the Ashburn Volunteer Fire and Rescue Department. I have given my full name, address and other pertinent information as requested. I understand that this application must be entirely completed to be considered.

I certify that I have carefully completed this application, that I have given all information herein without omission or falsification, that no information has been withheld about me or my background which may cause concern to AVFRD in any way, should the Board of Directors grant me membership with the Department.

I certify that I am a citizen or legal resident of the United States; a resident of the Commonwealth of Virginia; hold a valid driver’s license/permit; have a social security number, have a High School diploma or GED equivalent; and am fluent in English. Junior members should be attending High School. Applicants with Pennsylvania licenses must submit, at their expense, a copy of their driving record for the last 5 years. Non-US citizens/legal residents must provide a copy of their green card and visa.

By signing my name to this letter, I consent to the investigation of all facts and circumstances given in the attached application for membership to the Ashburn Volunteer Fire and Rescue Department. I also consent to the interview of any references provided herein, to any background investigation, and fingerprint check. I understand that I am subject to an agility test, a physical examination, and a drug screening.

I consent to periodic background and driving record checks for the duration of my membership.

I fully understand that should any information found herein be investigated and found to be false, that I will be subject to immediate dismissal from the Ashburn Volunteer Fire and Rescue Department without recourse.

Applicant’s Signature

Date of Application

Parent/Guardian Signature if applicant is under 18 and/or still in High School)
ASHBURN VOLUNTEER FIRE & RESCUE DEPARTMENT

20688 Ashburn Road, Ashburn, Virginia 20147

APPLICATION FOR MEMBERSHIP

PERSONAL INFORMATION

Last Name: ____________________ First Name: ____________________ M.I. ___ Male ___ Female ___
Maiden/Prior Name: ___________ Social Security No. ___________ Date of Birth: ___________ Age __
Home Address (Street, Apt. No.) ___________________________________________________________
City: __________________________ State: __________________________ Zip Code: ____________
Home Phone: ____________________ Work Phone: ______________________
Pager: ______________________ Mobile Phone: ______________ Email: _______________
Height: ______________ Weight: ______________ Marital Status: _________________________
Birthplace (City/State): ______________ Citizenship: ** ____________________________

**Note: non-US citizens must provide a copy of their resident card/visa

EMPLOYMENT HISTORY (last three years)

1. Current Employer Name: __________________ Working Days/Hours: __________________
   Supervisor’s Name ___________________________ Employer Phone: ______________________
   Employer Address _________________________________________________________________
   Position Held: __________________ Dates of Employment: _______________________

2. Previous Employer Name: __________________ Working hours/days _______________________
   Supervisor’s ___________________________ Employer Phone: _______________________
   Employer Address: _________________________________________________________________
   Position Held: __________________ Dates of Employment: _________________________
   Reason for Leaving: _______________________________________________________________

Please explain any gaps in your employment history:
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

Have you ever been discharged, asked to resign from a job, or resigned to avoid discharge? Yes:__ No:__
If yes, please explain:
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
MILITARY SERVICE: *Attach a copy of Copy#4 of your DD-214

Previous/Current Military Experience: ________________ Branch: ________________ Years of Service: ________________

Last Rank: ________________ Type of Discharge*: ________________ Date: ________________

Were you ever found guilty of a court martial offense while in the military? Yes: _______ No: _______

If yes, please explain in detail:

________________________________________________________________________________________

EDUCATION: (NOTE: Junior Applicants (16 and 17) attach copy of latest grades):

High School/ College/ Vocational: ___________________________ Graduation Date: ________________

Highest Grade Level: ________________ Degree/Major: __________________________

Post-Graduate Education: __________________________

PREVIOUS FIRE/EMS EXPERIENCE:

Are you presently or have you ever been a member of any fire, rescue, EMS, or emergency services agency?

Yes: _____ No: _____ If yes, what agency(s)? __________________________________

________________________________________________________________________________________

Supervisor Name & Title: ___________________________ Dates There: ___________________________

Address: ___________________________ Phone: ___________________________

Have you ever been denied membership, had disciplinary action taken against you, or been asked to resign by any organization or emergency services agency? Yes: _____ No: _______

If yes, please explain in detail: __________________________________

________________________________________________________________________________________

What is your area of interest: Fire _____ EMS_____ Administrative_____ Explorer Post Advisor_____

QUALIFICATIONS/SKILLS & TRAINING

Please list any fire, rescue, EMS, and/or emergency management training, experience, and certifications you currently hold. Include expiration dates and certifying state, department or agency. Please attach copies of your certifications to this application.

________________________________________________________________________________________

________________________________________________________________________________________

*REQUIRED* - In the space provided, explain why you would like to become a member of this department.

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________
MEDICAL HISTORY
Do you have any medical conditions or physical limitations that should be considered? Yes: _____ No: _____
Are you currently receiving any special medical treatment or medications? Yes: _____ No: _____
If yes to either question, please explain: ____________________________________________________________

CRIMINAL HISTORY.
Have you ever been convicted of or charged with a felony and/or misdemeanor? Yes: _______ No: ______
Explain: ____________________________________________________________________________________
_____________________________________________________________________________________________
List all prior Criminal/Traffic convictions (i.e. drunk driving, reckless driving, speeding, failing to obey traffic
signal, etc). List Charges, Place and Date: _______________________________________________________
_____________________________________________________________________________________________

DRIVING LICENSE Information: Please attach a copy of your driver’s license to this application.

***Pennsylvania license holders—please provide copy of your state’s driving history.
Do you have a valid driver’s license? Yes: _____ No: ______.
State of License: _______________ License Number: ___________________ Expiration Date: ____________

REFERENCES: not to include supervisors or employers already mentioned on page 2, relatives, or
spouses. Email addresses Preferred!!!!!!!!!!!!!!!!!! List three (3) references (Adults) whom you have known
you for at least two (2) years.

Junior applicants (ages 16 or 17) must also submit three separate letters of reference—from 3 different
people - 6 references in all)

1. Name: ______________________________________ Relationship: ________________________________
Home Address: ________________________________________________________________
Home / Mobile Phone: ___________________________ Work Phone: __________________________
Email: __________________________________________________

2. Name: ______________________________________ Relationship: ______________________________
Home Address: ________________________________________________________________
Home/Mobile Phone: ___________________________ Work Phone: __________________________
Email: __________________________________________________
AVFRD MEMBERSHIP FOR APPLICATION
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3. Name: ___________________________ Relationship: ___________________________
Home Address: ___________________________________________________________________
Home Phone: __________________ Work Phone: ________________________________
Email: _______________________________________________________________________

CERTIFICATION & AGREEMENT

This statement must be signed. Please read the following statement carefully before signing.

I hereby certify that the facts set forth in the above Application for Membership are true and complete to the best of my knowledge, and I have not intentionally omitted any information. I further certify that there are no willful misrepresentations or falsifications of the above statements and answers to questions. If a background/fingerprint/DMV investigation discloses such misrepresentations, omissions, and/or falsifications, my application could be rejected, and I could be disqualified from ever providing volunteer service with the Ashburn Volunteer Fire and Rescue Department.

I hereby certify that I have never been: (1) convicted of any felony; (2) convicted of any crime involving sexual misconduct or morals and decency; (3) convicted of any crime involving sexual or physical abuse of children, the elderly or the infirm; (4) convicted of any crime involving abuse, neglect, or financial exploitation, (5) or convicted of any crime involving initiating a false alarm, making a bomb threat, threats to burn, or arson.

Signature of Applicant: ___________________________ Date ___________________________

If applicant is under 18:

The responsibilities of a Fire and Rescue Department member involves many hazardous duties, including, but not limited to the following:
• Driving and riding on several types of emergency response vehicles
• The lifting and movement of heavy objects
• Fire extinguishment and rescue in an environment that could be toxic or potentially hazardous

I/We, the parents/guardians of ___________________________ have been duly informed of the duties our son/daughter will be required to participate in if he/she becomes a member of the Ashburn Volunteer Fire & Rescue Department, Inc., and we give our son/daughter permission to participate as a full member.

Parent/Guardian signature ___________________________ Date ___________________________

Parent/Guardian (print) ___________________________

Parent/Guardian address ___________________________