



Frederick County Volunteer Reserve Corps and Medical Reserve Corps

Check Here if Over 55

Check Here if you have a Medical Background

Name _____

Address _____

Home Phone () _____ Work () _____

Cell () _____ Email _____

Employment: Check Here if Retired

Employer: _____

Business Address _____

Current Job Title _____

Supervisor Name _____

Supervisor Phone () _____

Emergency Contact:

Emergency Contact Person _____

Relationship _____ Phone () _____

Education:

Last School/College Attended _____

Last Degree or Grade Attained _____

Special Training Applicable to Emergency Preparedness or Response

Medical Volunteer Applicant Credentials and Experience:

Licensure: Field, State, License Number, Expiration

General Liability Policy? Company Issued, Policy Number, Effective Date

Please describe any claims filed against you in the last five years:

List your area(s) of specialty:

How were you referred to the Frederick County Volunteer Corps?

I understand that the information on this application will be kept confidential and will be provided only to representatives of the Volunteer Frederick Emergency Volunteer and Medical Reserve Corps and its sponsoring agencies for the purpose of evaluating this application. I do hereby give the Volunteer Frederick Emergency Volunteer and Medical Reserve Corps permission to inquire into my background, including references, employment, licensure and/or volunteer history as part of the application review process. I give permission (to the holder of any such records) to release same to the Volunteer Frederick and/or its sponsoring agencies.

I agree to hold the Volunteer Frederick Emergency Volunteer and Medical Reserve Corps harmless from any liability, whether civil or criminal, that may arise as a result of the release of this information about me. I further agree to hold harmless any individual, agency, business or corporation that provides information or documents to the Volunteer Frederick Emergency Volunteer and Medical Reserve Corps.

Signature _____

Date _____

Please return to:

**VOLUNTEER FREDERICK, Inc., Attention: Emergency Volunteer Corps Coordinator
31 West Patrick Street, Suite L2, Frederick, MD 21701**

Telephone: 301-663-5214, Ext 4

Fax: 301-663-035

Email: MRC@VolunteerFrederick.org