

Stowe Mountain Rescue Application Packet

Application Packet



Dear Applicant:

We are very pleased that you are considering membership with Stowe Mountain Rescue. For your reference and convenience, this information packet contains a wealth of information including membership requirements, submittal process and member application.

There are three primary types of volunteers at Stowe Mountain Rescue—Rescue Team members that provide rescue services in high-angle and swift-water environments, Support Team members who provide technical mission support, and Associate members who provide important logistical and administrative support to our operation.

- Our Rescue Team members specialize challenging high-angle rescue, swift-water rescue, back-country search and rescue and wilderness first aid. Rescue members train year-round and must maintain qualifications in these disciplines.
- Support Team members work and train alongside rescue members and provide support for missions and training. Support team members have less stringent training requirements.

Volunteering as a member of Stowe Mountain Rescue may be very different from volunteer work you have previously provided; our mission is challenging as it takes a significant amount of time to train and prepare, requires uncommon dedication, and can involve significant physical strength as we work in diverse and austere conditions. We urge you to consider your application very carefully.

We encourage you to meet our members, look at our medical and rescue equipment, and explore our fleet and facilities. You can learn about the history and present operations of Stowe Mountain Rescue online at https://dps.stowevt.gov/smr.

Applications are due by December 31. A clearly defined interview process, initial observation period, and probationary period will define your interaction with us for the next 9-12 months.

Please do not hesitate to call or e-mail if we can be of any assistance with your application. Thank you for your interest in Stowe Mountain Rescue. We look forward to receiving your application.

Sincerely,

Jon Wehse

Jon Wehse Team Chief, Stowe Mountain Rescue



APPLICATION INFORMATION

About our Team and Mission

- Our mission is to provide rescue services of various nature to outdoor enthusiasts enjoying the terrain in and around Stowe. No two missions are alike, but we train for four key missions:
 - High- and low-angle rescue (requires extensive rock/ice climbing, technical rope system deployment and rope/litter system construction)
 - Swift-water rescue (requires strong swimmers and knowledge/awareness of swift current environments, boat operation and high-line tension systems)
 - Land navigation / search and rescue (requires land navigation techniques, use of tools and maps and mission-specific situational awareness)
 - Wilderness First Aid (requires Emergency Medical Technician/Emergency Medical Responder training and qualifications)
- We are a team of 15-20 volunteers with deep technical skills and experience operating in the
 outdoors. Skills honed enjoying the diverse climate and terrain allow us to operate extremely
 effectively in difficult conditions during rescue missions.
- Most of our members are avid backcountry skiers, rock climbers, ice climbers, mountain bikers, hikers, kayak and whitewater rafters and have unique awareness and experience operating in high-risk environments.
- Most missions require heavy physical exertion to reach injured parties and extract them from their location. We have all-terrain vehicles and snow mobiles to assist us during some missions.
- We do not operate in shifts; rather, we are always on call. Most of our missions occur late in the day and into the evening, primarily during weekends and holidays.

Types of Membership

There are two primary types of volunteers at Stowe Mountain Rescue—Rescue Team members that provide rescue services in high-angle and swift-water environments; and Support Team members who provide technical mission support. A team member may be qualified as a Rescue Technician in one are (e.g., High-Angle Rescue) and act as a Support Member in another (e.g., Swiftwater Operations), or just be a Support Member for all operations.



- Support Member: Support Members are trained in general mission operations, incident
 command system, vehicle operations, basic land navigation, search techniques, litter
 carrying techniques, basic technical rope rescue systems and shoreline support for water
 rescues. Support Members provide technical assistance to Rescue Members during
 missions and training. Support Members do not operate in high-angle / swift-water
 environments, but rather support Rescue Members who are operating in these hazardous
 environments.
- Rescue Member: Rescue Members have undertaken rigorous, advanced training in highangle and swift-water rescue operations. They are skilled in designing advanced rescue
 systems and executing rescues in high-angle and swift-water environments. Based on
 extensive training and investment with the team, these members are highly encouraged to
 commit to many years of service with the Mountain Rescue Team.

Applicants to Stowe Mountain Rescue must:

- Be a resident of Stowe or live in an adjacent community.
- Possess strong recreational background in outdoor activities (hiking, skiing, mountain biking, rock/ice climbing, white water paddling etc.).
- Submit a fully completed and signed application which includes all supporting materials listed in this application; incomplete applications will not be considered.
- Sign the volunteer service commitment as part of the application.
- Provide an official copy of your driver's record from the Vermont DMV (The form is available on the web site).
- Present a photocopy of your driver's license, EMS certification, CPR card, and any other current Fire/Rescue/EMS certifications you possess.
- Submit your application via U.S. Mail or in person at our station on South Main Street.
- Instruct your references to complete and return the reference form directly to us.



Application Process

- Submit a completed application by December 31 (Open enrollment is November and December of each year).
- Ask your references to complete and return the reference forms directly to us by the first week of January so that they arrive prior to your interview (mid January).
- Attend an interview with select members of the Mountain Rescue Team, typically including the Team Chief/Deputy Chief, Training Officer and at least two other members. (January).
- If selected to advance, you are entered into a 3-month Observation Period. During this time
 frame you must attend at least 2 Monthly meetings and 2 monthly trainings. During the
 Observation Period you are highly encouraged to get to know the team members but,
 unfortunately, you will only be allowed to observe training events.
- At the end of the Observation Period (May), the team will vote on whether to allow you to
 proceed to the 6-9-month Probationary Period. Only candidates we feel have a high degree
 of confidence for successfully completing the rigors of the Probationary Period will be
 allowed to proceed. Successful candidates demonstrate a willingness to participate, engage
 with team members and truly understand the commitment about which they are to undertake.
- During the Probationary Period, probationary member, able to respond to missions and actively participate in all Stowe Mountain Rescue training activities.
- The Probationary Period is where you will spend a significant amount of time engaged in training and orientation activities. The goal is to complete an intensive training program that is designed bring probationary members up to "Support Member" status by November/December. This typically entails a two-day immersion event (12-16 hours over one weekend) and then two two-hour training sessions twice per month in addition to the regular monthly training.
- Probationary members are issued minimal equipment but have access to team gear for training sessions and rescue calls.
- Full team member status will be determined in November when the current team votes to accept new members.

Your primary contact throughout the application process is the Training Officer. The Team Chief and Training Officer will review your progress on a regular basis throughout the Application, Observation and Probationary periods.

Application Packet



Please consider before applying

- ✓ Are you a resident of Stowe or an adjacent community?
- ✓ Are you willing to commit extensive time and energy to this team for at least 3-5 years?
- ✓ Are you able to meet the time commitment?
- ✓ If you do not have medical credentials, are you willing to pursue EMT/EMR ratings and commit to refresher requirements (typically 80 hours of extracurricular medical training every 2 years)?
- ✓ Are you able to support the orientation and membership process?

Application Form

Your application must be fully completed when submitted. It will remain confidential while being reviewed by the interview committee.

References

Your references should make their submissions directly to Stowe Mountain Rescue at the mailing address shown below.

Stowe Mountain Rescue / Team Chief P.O. Box 730 Stowe, Vermont 05672

Use persons for references that you have known at least one year. You may use only one Stowe Mountain Rescue member as a reference. Your references should be received by January 10.



APPLICATION FOR MEMBERSHIP

Stowe Mountain Rescue does not discriminate against otherwise qualified applicants based on race, color, creed, religion, ancestry, age, gender, marital status, national origin, disability or handicap, veteran status, or any other protected status.

I am applying as:		RESCUE Mem	ber [SUPPORT Member	
APPLICANT'S GI	ENE	RAL INFORI	MATIO	N		
Legal Name:		First	Middle		Prefer To Be Called:	
Address:						
How Long Have You Been	A Re	sident Of The Stowe	Area:			
Mobile Telephone Number	:			F	Home Telephone:	
E-Mail Address:						
Date of Birth (MM/DD/YYY	Y)					
EMS CERTIFICA	TIO	NS				
Type Of Certification:					Expiration Date:	
Vt Certification Number:					National Registry Number:	
Professional Membersh	ips: _					

Phone: 802.253.9060 | mtnrescue@stowevt.gov | https://dps.stowevt.gov/smr

Application Packet



EDUCATION / TRAINING	
High School: Diploma:Yes	sNo
School:	City/State:
	++++
University/Vocational School: Ye	ears completed (circle one) 1 2 3 4
Major / Degree(s) earned:	
School:	City/State:
	++++
Other training or degrees: Major / Degree / Program:	
School:	City/State:
Course(s):	
	++++
Please list your EMS/Rescue/Fire	e related skills, Certifications or Professional Memberships:

You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, religion, ancestry, age, gender, marital status, national origin, disability or handicap, veteran status, or any other protected status.

Application Packet

	STON	VE
3		V
V	7AT	RES

			WAIN RE
Have you ever been an applicant	to or member of any f	ire or rescue agency?	
YesNo			
If so, please state agency name(s),	, location(s), and date(s)	of application and/or members	ship:
EMPLOYMENT INFORMATIO (Include last employer first. Include)			
List at least 10 years of Employn			a avnlain
any gaps in work history.	ork experience, piease i	attach additional pages. Fieasi	з е хріан і
Dates of Employment: From	To onth/Year Month	Position:	
Employer:	Depa	rtment:	
Address:			
Telephone:	Supervis	sor:	
Weekly Hours:	Full Time:	Part Time:	
Duties:			
Reason For Leaving:			

++++

Phone: 802.253.9060 | mtnrescue@stowevt.gov | https://dps.stowevt.gov/smr

Application Packet

				AIN
Dates of Employment: From	To	Month/Year	_ Position:	
Employer:		Department	:	
Address:				
Telephone:		Supervisor:		
Weekly Hours:	Full T	ime:	Part Time:	
Duties:				
Reason For Leaving:				
	+	+++		
Dates Of Employment: From	Tc) Month/Year	_ Position:	
Employer:		Department:	:	
Address:				
Telephone:	Supervisor:			
Weekly Hours:	Full T	ïme:	Part Time:	
Duties:				
Reason For Leaving:				

Phone: 802.253.9060 | mtnrescue@stowevt.gov | https://dps.stowevt.gov/smr

++++

Application Packet



- WAIN RES
Have you ever been involuntarily discharged, resigned from a job (including a volunteer fire or rescue agency), or asked to resign to avoid termination? Yes No
if yes, please explain
May we contact your former employers?Yes No
RECORD OF CONVICTION
Have you ever been convicted of a crime other than a minor traffic offense?
YesNo
List any criminal charges that have been brought against you, and adjudication results, except those that have resulted in a finding of not guilty or a complete dismissal. (Please use a separate sheet.)
A current copy of your driver history must be attached to this application when it is submitted. If you have resided in Vermont for 12 months or less, please also include a copy of the driver's history from the state in which you were previously licensed.

A conviction will not necessarily automatically disqualify you for membership. Rather, factors such as age, date of conviction, seriousness and nature of the crime, and rehabilitation will be considered.

Application Packet



REFERENCES

Please list those to whom you have given reference forms. Please do not include more than one reference from a Stowe Mountain Rescue member, nor references from persons that have known you less than one year.

Name:		Phone:
Address:		
	++++	
	T T T T	
Name:		Phone:
Address:		
	++++	
Name:		Phone:
rvaine.		T Hone.
Address:		

++++



Applicant Questions

Describe your outdoor experience and interests:
List any relevant training or courses you have taken specific to search & rescue:
List any emergency services experience you have had:
Briefly describe your interest in Stowe Mountain Rescue, and what you feel you could add to our team:



Active Membership Volunteer Service Commitment

	, on my nonor, nereby commit to:
✓	Provide volunteer service throughout the year, including nights, weekends, holidays.
✓	Provide a minimum of 36 consecutive months of service.
✓	Attend monthly business and continuing education meetings: Goal is 8 meetings per year
	(75%), 8 training sessions per year (75%) and 50% of calls/missions per year for new team
	members.
✓	Maintain all required certifications and skills based on membership role and status.
✓	Comply with the by-laws of the organization, team policies and procedures, and the direction
	of the Officers.
✓	Maintain patient confidentiality.
✓	Understand that membership with Stowe Mountain Rescue is at-will and may be terminated
	at any time with or without cause by the Team Chief.
Signat	ure of Applicant
Date	



APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above application are true and complete to the best of my knowledge. I authorize Stowe Mountain Rescue and its Officers to verify the accuracy of this information by contacting educational institutions, references and employers and past employers, and current or former fire and rescue agencies, and to rely on and use such information as they see fit. I hereby release Stowe Mountain Rescue, its Officers and assigns from any and all liability of whatever kind and nature which, at any time, could result from obtaining and having a membership decision based on such information. This application and all information obtained is the property of Stowe Mountain Rescue.

I understand that, if granted membership, falsified statements of any kind or omissions of facts called for on this application, regardless of time of discovery, shall be considered sufficient basis for dismissal.

I understand that should an offer of membership be extended to me and accepted that I will fully adhere to the guidelines, rules, and regulations of the Team. I further understand, however, that neither the guidelines, rules, regulations of membership nor anything said during the application and interview process shall be deemed to constitute the terms of an implied contract for continued membership. I understand that any membership is for an indefinite duration and is at-will and that either I or the Team may terminate my membership at any time with or without notice or cause.

I understand that if I am offered membership, membership is conditioned upon my providing such other and further information as may be required by the Team.

Printed Name of Applicant: _		
Signature of Applicant:		
Date:	 	