

# **Welcome to the Saratoga Medical Reserve Corps**

Thank you for your interest in becoming a member of the Saratoga MRC. As a volunteer organization we are dependent upon the commitment of our members as we endeavor to enhance local response capabilities to disasters or emergency events and to increase the emergency preparedness of Saratoga citizens.

Each of you has unique skills and abilities to add to the overall capability of the organization to be a real asset to our organization in meeting the health and safety needs of our residents. You will be providing a valuable service to your friends and neighbors as well as to those residents who may need extra care in times of emergency.

By registering, organizing, and training volunteer health professionals in advance, the Saratoga MRC will provide a response team that can be readily mobilized when the existing health infrastructure is overwhelmed and unable to provide needed care in a timely manner.

Please know that your contributions are the key to the success of the Saratoga MRC, and that we will strive to be respectful of your time and circumstances. You can determine the level of involvement as you consider your other commitments.

It is crucial that we have up to date e-mail and telephone numbers for you if we need to activate the MRC for service. If you move, change work, or any of your contact information please call your MRC contact as soon as possible so we can update our records. Also be sure to log on and update the Disaster Health Care Volunteer website. Most of the communications to our team will be by e-mail for efficiency.

If activated for volunteer service, please bring your current ID cards and stocked Go Bag. You will be informed of the report to duty location.

Our Santa Clara County Department of Public Health web site has many informative articles on public health preparedness that may be helpful to you. You can also sign up for their HealthWatch newsletter via e-mail from this site. Here is their web address:

Our state web site address is <http://www.disasterhealthcarevolunteers.ca.gov> . They have interesting articles and newsletters from around the country you can access.

You will receive e-mail notices from the Saratoga MRC on a regular basis to let you know of any upcoming training events or volunteer service opportunities.

Thank you again for your willingness to volunteer your time and skills to the Saratoga MRC. We look forward to working with you for the benefit of our communities.

Saratoga MRC Unit Coordinator

Jim Yoke

[jim.yoke@sccfd.org](mailto:jim.yoke@sccfd.org)

(408) 887-7818

Saratoga MRC Assistant Unit Coordinators

Maggie Church

[churchgrup@sbcglobal.net](mailto:churchgrup@sbcglobal.net)

(408) 379-3132

Susan Teeple Gardner

[stgardner9@aol.com](mailto:stgardner9@aol.com)

(408) 499-7176

# Saratoga Medical Reserve Corps

Welcome to the Saratoga Medical Reserve Corps. We appreciate your willingness to volunteer your time and experience to increasing our county's ability to ensure the health and safety of our citizens. Use this checklist to track your progress in becoming an active member of the corps.

## **To become a volunteer member of the Saratoga MRC:**

- Download the application online and submit to a unit coordinator
- Go to the Disaster Health Care Volunteer web site for the State of California  
<http://www.disasterhealthcarevolunteers.ca.gov> and join putting yourself as a member of the Saratoga Medical Reserve Corps.
- Complete City of Saratoga Volunteer form

## **Within six months of becoming a volunteer:**

- Complete orientation for new volunteers

There are only 5 Required MRC training courses (4 of them can be taken online at <http://www.FEMA.gov>)

- IS 100 (Incident Command Structure 100)
- IS 200
- NIMS 700 (National Incident Management Structure)
- CBRNE (Chemical , Biological, Radiological, Nuclear & Explosives) Series
- MRC 101 at <http://www.medicalreservecorps.gov>
- Understand the Core Competencies for Medical Reserve Corps Volunteers
- Sign HIPAA notice for patient confidentiality
- Acquire DSW Badge through Jim Yoke

# Saratoga Medical Reserve Corps

## Volunteer Application

### APPLICANT INFORMATION:

Name: \_\_\_\_\_

Other names previously used: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Emergency Contact Information:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ Address: \_\_\_\_\_

### TRAINING AND EDUCATION:

Have you graduated from high school or received a high school equivalency diploma (GED)

Yes

No If no, circle highest year completed: 1 2 3 4 5 6 7 8 9 10 11 12

**PROFESSIONAL LICENSE OR CERTIFICATE, IF REQUIRED** (Include expired medical licenses held within the last ten years)

Type	License Number	Date Issued	Expiration Date

Do you have any other specialized emergency training? (FEMA, Military, CERT, Red Cross, HAZMAT, CPR, AED, First Aid, etc.) Give a brief description.

\_\_\_\_\_

Are you part of any other emergency or disaster response organization? Explain:

\_\_\_\_\_

**LANGUAGES:** List languages you speak, read, and write other than English

\_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Full Time  Part Time  Retired  Other:

**REFERENCES:** List two persons not related to you who have knowledge of your qualifications

Full Name	Address	Occupation	Telephone
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Full Name	Address	Occupation	Telephone

1. If the position for which you are volunteering requires driving a vehicle, do you possess a current driver's license?  Yes  No  
State \_\_\_\_\_ Type \_\_\_\_\_ Number \_\_\_\_\_
2. Are you 18 years of age or older? If under 18, what is your birth date?  
 Yes  No
3. Are you eligible to work in the U.S.?  
 Yes  No

**VOLUNTEER TYPE:** (mark or circle all that apply)

(a) Level one – Medical

- MD: Area of Specialty:  
Board Certified?  Yes  No
- Physician Assistant
- Nurse Practitioner
- Nurse: RN LPN
- Do you have prescriptive authority?  Yes  No
- Pharmacist
- Dentist
- Veterinarian
- Mental Health Professional      Psychologist      Other:
- Licensed Social Worker
- Public Health Specialist (epidemiologist, environmental health, infectious disease, bioterrorism specialist, etc.)
- EMT – Intermediate
- EMT – Basic
- Paramedic

(b) Level two – Medical associate

- Medical assistant
- Medical technician
- CAN      CRNA
- Physical therapist
- Pharmacy Tech
- X-ray tech
- Respiratory Therapist
- Dental technician or assistant
- Search and Rescue
- Mortician

(c) Level three – communications

- Amateur Radio: License # \_\_\_\_\_ Call Sign \_\_\_\_\_ Level \_\_\_\_\_
- Information technology specialist
- Interpreter
- Geographic Information Systems personnel (GIS)
- Computer specialist
- Health Educator/ Communicator

- Public Relations
- Media/ Communications
- (d) Level four – support personnel
  - Plant Management
  - Security Worker
  - Housekeeping
  - Dietary
  - Administrative
  - Clerical
  - Clergy/ Chaplain     *Denomination*
  - Faith-based Recruit (Mark here if you were referred by your church)
  - CDL
  - Food Handlers Permit
  - Safety
  - Warehouse Specialist
  - Heavy Equipment (Access To Equipment)
  - Mechanic
  - Welder
  - Engineer
  - Electrician
  - Licensed Child Care

Other \_\_\_\_\_

**READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING THIS STATEMENT:**

I affirm this application contains no misrepresentation or falsification and that the information is true and complete to the best of my knowledge and belief. I give the City of Saratoga permission to inquire into my educational background, references, driving record, employment, volunteer history and police record. I further give permission to the holder of any such records to release the same to the City of Saratoga and I hold the City of Saratoga harmless of any liability, whether civil or criminal, that may arise as a result of the release of the information about me. I further hold harmless any individual, agency, business or corporation that provides documentation to the City of Saratoga. I understand that as a volunteer, I am not paid for my services.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Return completed application to:

**Or**

**Maggie Church  
12637 Paseo Olivos  
Saratoga, CA 95070  
(408) 379-3132**

**Susan Teeple Gardner  
20480 Williams Avenue  
Saratoga, CA 95070  
(408) 868-0251**