

Northern Ohio Valley Area Search and Rescue, Inc.
NOVASAR
P.O. Box 468 - Wheeling, WV 26003
Application for Membership

NOTE! Follow These Instructions!

1. Fill out **Both** pages of this application.
2. Take the **Criminal Records Check Card** to any police agency and have your fingerprints recorded
3. Return this application, plus the CIB card, plus a photocopy of your driver's license, plus your \$20.00 application fee to: **NOVASAR, P.O. Box 468, Wheeling, WV 26003**
4. Your application will be read at the first membership meeting following receipt of the completed application. This application will not be presented if items 1, 2, or, 3 have not been completed.
5. You will be voted on at the membership meeting following the first reading of the application.
6. You **MUST** attend all orientation session before participating in NOVASAR activities.

I, _____ (print name). Hereby apply for membership in Northern Ohio Valley Area Search and Rescue, Inc. If accepted. I agree to abide by the organization's By-Laws and Stranding Rules. I further agree to actively participate in training sessions, meetings and emergency responses. I understand that failure to participate is cause for discharge from the organization I understand that I must complete the required basic training program within one year of joining in order to maintain my membership.

Signature: _____ Date: _____

(Applicants must be at least 18 years of age at the time of application.)

I. Applicant biographical data

Age _____ Date of Birth _____ Phone: (H) (____) _____ - _____ (W) (____) _____ - _____

Address _____ City _____ ST _____ Zip _____

Employed by: _____ Occupation: _____ Blood Type _____

E-mail address: _____ Ham Radio Call sign _____

Cellular Phone # (____) _____ - _____ Beeper # (____) _____ - _____

Please list any medical problems which will limit your ability to perform SAR missions: _____

II. Training (attach copies of certificates):

____ NASAR Fundamentals of SAR ____ Man Tracking ____ Introduction to SAR/Basic SAR

____ Incident Command System ____ Dog Handling ____ Rope Rescue ____ Other

List all current and past membership in other emergency response organizations: _____

III. Volunteering preferences: Is there a particular type of volunteer work in which you are interested?

- Field Team Member Field Team Leader Planning/Incident Staff
 Dog handling Radio Communications Other: _____

Availability (days and hours) _____

Do you have access to a vehicle you can use for volunteer response? Yes No

How did you hear about our team? _____

IV. References:

List two references, who are not relatives, who we may contact.

Name _____ Address _____

Name _____ Address _____

V. Verification and Consent for Reference and Background Check

I verify that the above information is accurate to the best of my knowledge. I give NOVASAR permission to inquire into my educational background, references, licenses, police records, and employment and/or volunteer history. I also give permission to the holder of any such information to release it to NOVASAR.

I hold NOVASAR harmless of any liability, criminal or civil, that may arise as a result of the release of this information about me. I also hold harmless any individual or organization that provides information to the above named organization. I understand that NOVASAR will use this information only as part of its verification of my volunteer application.

Name (Please Print) _____ Social Security Number _____

Signature _____ Date _____

Witness _____ Date _____

IV. Skills and Interests

Education: _____ Degree: _____ Institution: _____ Dates attended: _____

Licenses held: _____

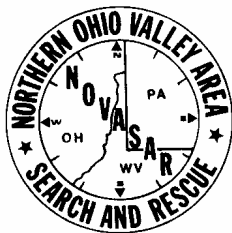
Hobbies, skills and interests: _____

Occupation: _____ Employer: _____

Employer's address: _____ Phone: (____) ____ - _____

IV. Work Experience (paid and volunteer, beginning with the most recent)

Position	Organization	Dates
_____	_____	_____
_____	_____	_____



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NOVASAR
P.O. Box 468 - Wheeling, WV 26003
Application for Membership

Application: Fee a \$20.00 (twenty dollar) non-refundable application fee must be attached to this application.

Background check: Due to the nature of our organization and its public service activities, it is essential that we make every effort to assure that our members are of good repute and good character. Federal law requires that we conduct a criminal background investigation. Please complete the following Consent for Background Investigation. You will be asked to complete a form for a State Police criminal investigation.

Conflict of interest: To assure commitment and availability and to avoid conflicts of interest, membership in other search and rescue teams is not permitted.

Physical demands: Members are expected to be able to carry a 20-35 pound "Ready Pack". This is the standard pack carried during the National Association for Search and Rescue practical exam for Search and Rescue Technician II (all members are encouraged to take this professional certification exam after they have acquired sufficient experience).

Commitment: Members are expected to attend meetings and trainings on a regular basis.

Sponsor: All applicants must have a Sponsor who is an Active Status member in good standing. Applicants without a Sponsor will be interviewed by an investigating committee who may sponsor the applicant if they believe the individual to be a potential asset to the organization.

Sponsored by (Active Member)

I, _____ (print name), hereby propose for membership in Northern Ohio Valley Area Search and Rescue, Inc., the above listed applicant. I testify that I have knowledge of this person's interest and moral character and believe that the applicant will be a credit to the organization.

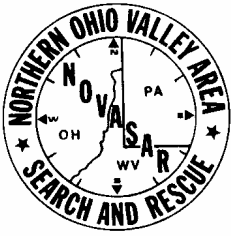
Sponsor's Signature: _____ Date _____

Seconds: (1) _____ Date _____

(2) _____ Date _____

Initial vote Date: _____ For _____ Against _____ Accept/Reject

Second vote Date: _____ For _____ Against _____ Accept/Reject



Northern Ohio Valley Area Search and Rescue, Inc.

NOVASAR

P.O. Box 468 - Wheeling, WV 26003

Application for Membership

Consent for Background Investigation

I, _____, (print your name) hereby grant Northern Ohio Valley Area

Search and Rescue, Inc. (NOVASAR) and any police agency, permission to conduct a background investigation

Signed: _____ Date: _____

Witness: _____ Date: _____

Please complete the following:

If a married woman, list maiden name: _____

Alias, nicknames, or prior legal name: _____

Social Security Number: _____ - _____ - _____

Other addresses within the past 5 years: _____

Driver's License: State _____ Number: _____

Conviction of a felony is a bar to membership.

Have you ever been convicted of a felony? (circle one) Yes No

Failure to answer this question will result in your application being rejected.

RECORD REQUEST CHECK

Please take the enclosed Record Request Check card to a local police agency and have your fingerprint recorded by a law enforcement officer. Fill out the front of the card. In the blank for "Agency" print NOVASAR and list the address as PO Box 468, Wheeling, WV 26003. Return this completed card with this application to NOVASAR.

NOVASAR is a West Virginia Non-Profit Corporation, registered in the States of West Virginia and Ohio to provide Search and Rescue services. West Virginia residents may obtain a summary of the registration and financial documents from the Secretary of State, State Capitol, Charleston, West Virginia 25305. Registration does not imply endorsement. NOVASAR is registered with the u.s. IRS as a 501(c)(3) not-for-profit charitable organization.