Fire District No. 1

Berlin Township

186 Haddon Avenue
West Berlin, New Jersey 08091
856 – 767 – 1839

New Member Application Checklist

Application Submitted to Company
Date: _____________________

Application Submitted to Membership Committee
Date: _____________________

Application Approval by Company
Date: _____________________

Applicant Authorized for Drug Test
Date: _____________________

Application Approval by Fire District
Date: _____________________

Application Approval by Company: ____________________________ Date: _____________________
President

Application Approval by Fire District: __________________________ Date: _____________________
Chairman

This checklist shall be attached to each application as it is received by the Fire Company and remain through the application process.
Dear Applicant,

Thank you for applying for membership to West Berlin Fire-Rescue.

The following steps have been established to assist you in the timely completion of a membership application.

1. Complete the Membership Application Form. Return to the Fire District Office. 186 Haddon Ave. West Berlin, NJ.

2. Sign and date the Authorization for Release of Information form. This form must be notarized. Return with the Membership Application form as explained above.

3. Your application will be checked for completeness and your name forward to the Recruit & Retention Officer. He/she will contact you to schedule your orientation. At this time the Department’s participation requirements will be explained to you.

4. A Driver’s License Check will be conducted to determine your eligibility with the Department and arrangements will be made with the Berlin Township Police Department to have your Criminal History Check done.

5. Favorable the results of both records check, the Fire District or the (RRO) will contact you to arrange a pre-placement drug screening.

6. Upon successful completion of everything above, your application will be presented to the Board of Fire Commissioners for formal approval.

7. After the Board approves your application for membership, the Fire District or (RRO) will notify you and advise you of the date for your Recruit Indoctrination. At this time the (RRO) will complete the indoctrination process and issue the necessary components and personal protective equipment and paging you may need.

Should you have any questions regarding this application process, please contact the Fire Administration Office at (856) 767-1839.
Basic Expectations of a Volunteer Member of West Berlin Fire-Rescue

Dear Prospective Member,

Welcome and thank you for your interest in becoming a volunteer with West Berlin Fire-Rescue. We are a volunteer department whose mission is “To Provide Quality Fire and Rescue Services” to the residents of Berlin Township. This mission is accomplished through the dedication and hard work of the select group of residents who sacrifice their time and energy to protect, help and serve their neighbors. While volunteering with West Berlin Fire-Rescue may provide some of the most fun, challenging, and rewarding experience of your life, the commitment you are making is not one to be taken lightly. While your fellow volunteers will be depending on you to pull your weight as part of the team, the citizens of the township will be depending on you to protect and save their lives. West Berlin Fire-Rescue is excited at the prospect of having you join and become part of our family, but only ask that you are sure of your commitment to fulfill the expectations of volunteer member.

Expectations of a Firefighter

a. Be at least 18 years and a resident of the Township of Berlin.
b. Must satisfactorily complete a medical examination as performed by the Fire District physician including drug testing.
c. Possess a valid New Jersey State driver’s license and maintain a good driving record.
d. Have not been convicted of a crime.
e. Dedicated the minimum required amount of time to remain as an active member in good standing as defined in department SOP’s. Estimation of monthly commitment is below:

Activity

a. 50% Training Nights (Wednesday’s starting at 7pm) 1st and 4th
b. 60% Company/Department Meeting (2nd and 4th)
c. Respond to the minimum of 25% fire calls.

** Attend a 160 hour Firefighter 1 Certification class. Classes change time to time from the Camden County Fire Academy.

** Perform the job functions of a firefighter in a professional and responsible manner that reflects positively on the department and the township alike. This includes calls, training, and at all times a member is in uniform.

While becoming a volunteer member with West Berlin Fire-Rescue can be a large time commitment, the rewards of serving the community where you live are plentiful. However, please remember becoming a volunteer requires a considerable investment of the tax-payers money for your medical examination, turn-out gear, equipment, etc. If you are confident in your decision to commit to the time and hard work required, the department is excited to make that investment in you and help you learn the skills needed to succeed in this field. The last thing anyone wants is to see you fail to have the time or lose interest, and end up letting down your fellow members or the citizens of the township by quitting. However, if you are not truly committed, or unsure of your decision, West Berlin Fire-Rescue
would urge you to take some time and fully evaluate the decision to join the department. Any questions or guidance you need in making the decision can be directed to the contact below.

**Recruitment and Retention Officer:**
Contact the Fire District Office
(856) 767-1839

**West Berlin Fire-Rescue**
**Volunteer Membership Application**

Name:_________________________________________ Date of Birth:_________________________
(Last) (First) (M.I.)

Address:____________________________________________________________________________

Home Phone:________________________ Work Phone:________________________ Ext.________

Cell Phone:__________________________________________________________________________

How long have you been a Township resident?
If you have resided at this address for less than one year, please supply previous address:
__________________________________________________________________________________

Social Security No:____________________________

Driver’s License No:________________________________ Exp.________________________

Employer:________________________________________

Employer’s Address:_________________________________________________________________

Your Occupation:_____________________________________________________________________

Do you belong to any other community groups? ( ) Yes ( ) No
If yes, please give details:___________________________________________________________

Are you currently certified in Cardio Pulmonary Resuscitation (CPR)? ( ) Yes ( ) No
(If yes, Provide copy of CPR card)

**Previous Emergency Services Experience:**
Do you have any previous firefighting or EMS experience? ( ) Yes ( ) No
If yes, where and for how long:_________________________________________________________________

Do you have any specialized training and/or experience? ( ) Yes ( ) No
If yes, please describe:_____________________________________________________________________

Last Updated: December 22, 2017
***If you are an EMT please provide a copy of your basic EMT Certification.
***If you are a certified firefighter please provide a copy of your Firefighter 1 Certification.

Did you serve as an officer, if so what position(s)? ____________________________________________

Did you achieve any specialized training/skills? If so please describe: _____________________________
_____________________________________________________________________________________

Where you qualified to operate apparatus or specialized tools? If so please describe: ______________
_____________________________________________________________________________________

How did you learn about volunteer opportunities with West Berlin Fire-Rescue; Recruitment Drive, Current Member, Advertisement? ____________________________________________________________________________
_____________________________________________________________________________________

*** Applications with previous emergency services training and/or experience, please provide copies
Of any certifications you may hold. Ex- (FF1, EMT, CPR, Incident Command I-100, I-200, I-700, etc.)

The information that I have supplied is both truthful and accurate to the best of my knowledge. I have provided copies of any training records where copies are requested in the application. I understand that willfully supplying inaccurate information may result in my application being rejected.

West Berlin Fire-Rescue reserves the right to contact other Fire-EMS agencies listed as past experience to verify prior membership and certifications.

___________________________________________
Date Applicant’s Signature
West Berlin Fire-Rescue
Personal Directory Update

This form must be filled out completely by applicant:

Name: __________________________________________ Date: _____________________

Blood Type: _____________________________________ Allergies: ________________________

Medications: _______________________________________________________________________

Physician: ______________________________________ Phone: _________________________

Special Medical Information: _______________________________________________________

Emergency Contact:

In Case of Serious Injury

1st Call Name: ______________________________ Relation: ____________________________
Address: __________________________________ Phone: _____________________________

2nd Call Name: ______________________________ Relation: ____________________________
Address: __________________________________ Phone: _____________________________

3rd Call Name: ______________________________ Relation: ____________________________
Address: __________________________________ Phone: _____________________________

In Case of Death

1st Call Name: ______________________________ Relation: ____________________________
Address: __________________________________ Phone: _____________________________

2nd Call Name: ______________________________ Relation: ____________________________
Address: __________________________________ Phone: _____________________________

3rd Call Name: ______________________________ Relation: ____________________________
Address: __________________________________ Phone: _____________________________

Last Updated: December 22, 2017
Authorization for Release of Information

RE: Name: __________________________________________ 
__________________________________

Address: _____________________________________________________________________________ 
_____________________________________________________________________________________

Social Security #____________________________ Date of Birth: ________________________________
Driver’s License #_______________________________________________________________________

To all law enforcement agencies, police departments, motor vehicle departments, probation departments, selective boards, physicians, hospitals, and other institutions and agencies without expectation:

I, _______________________________, am making application for appointment West Berlin Fire-Rescue which is under the jurisdiction of Berlin Township Fire District No. 1. As part of that application an investigation is being conducted to determine my eligibility.

You are authorized and directed to release to Berlin Township Fire District No. 1, as well as its officer representatives, and information and documentation they may request.

If I am hired by the Fire District, this authorization shall be effective so long as I am a member of said Department, unless sooner revoked by me in writing; you may rely upon that this authorization is still in effect and of my continuing employment.

A photo static copy of this authorization will be considered as effective as the original.

Applicant’s Signature_______________________________________

Signed and Sworn before me this: ________ day of: _______________________, 20______.

Signature of Notary Public__________
West Berlin Fire-Rescue
Personal Accountability Tag Data Form

This information is utilized to create a Personnel Accountability Tag on your behalf.

**Personal Information**

First Name: ____________________________________________

Middle Name: __________________________________________

Last Name: ______________________________________________

Address: ________________________________________________

Telephone #: ____________________________________________

DOB: ____________________________________________________

Social Security #: __________________________________________

Driver’s License #: __________________________________________

Height: __________

Weight: __________

Eye Color: __________

Hair Color: __________

Primary Beneficiary: ____________________________________________
Medical Information

Past Medical History


Medication


Allergies


Blood Type

Organ Donor Yes/No

Physician’s Name

Physician’s Number

Physician’s Address


Emergency Information

Emergency Contact #1

Phone #

Emergency Contact #2

Phone #

Please list any individual you wish to accompany departmental personnel during emergency notifications. (Friend, relative, clergy, etc.)

Name

Address

Phone #
West Berlin Fire-Rescue
Fire Physical Agility Test

The Physical Agility Test has been designed to measure a candidate’s ability to perform some of the basic tasks required of a firefighter at an emergency scene. This test consists of five different tasks that must be performed continuously as prescribed below within a time limit of five minutes. During this test the candidate is required to wear approved firefighter PPE (FF turnout coat, bunker pants, helmets, and gloves). If the candidate has any problems while performing ANY task, he/she will alert the examining officer at once. Return the completed form to the FDTO.

Agility Test Evolutions

1. The candidate must climb a ladder approximately 24’ above ground to the roof area. The candidate will ascend the ladder until he or she can touch the top rung in one continuous climbing motion, without any stops or hesitation. After touching the top rung, the candidate will descend the ladder without any stops or hesitation.

2. The candidate will proceed to the hose hoist where he/she will hoist a 50’ section of 2 ½” hose (approximately 40 pounds) to the top of the hoisting mechanism using the attached rope. After the hose roll reaches the hoisting mechanism, the candidate will return the hose roll to the ground in a controlled manner.

3. The candidate will proceed to the ladder raise evolution. In this portion of the test, the candidate will raise a 14’ roof ladder from a flat position on the ground and place it so that it is ready to climb. The candidate may use any techniques that he/she desires to raise and position the ladder, as long as these techniques use appropriate safety precautions.

4. The candidate will proceed to the hose drag evolution where he/she will drag a charged 100’ section of 2-1/2” hose in a straight line for a distance of 75’. The hose line will be pressurized to 50 psi at the engine discharge gauge. The evolution will be declared completed by the examiner when the nozzle crosses the finish line.

5. The candidate will proceed to the rescue mannequin (weighs 175 pounds) which is placed on its back-face up. The candidate will carry or drag the mannequin in a straight line for a distance of 15’. The candidate may use any technique to carry or drag the mannequin.

Applicants Name: ___________________________________________  
Testing Officer: _____________________________________________  
Date of Test: ______________________________ Applicant’s Total Time: _________________

Comments: ________________________________________________________

____________________________________________________________________________
West Berlin Fire Rescue
Physical Test Record

To be filled out by a Physician licensed in the State of New Jersey and returned to West Berlin Fire Rescue. All Sections of the physical must be properly filled out or the application will be returned.

Please Print

Name: ____________________________________________________________________________________________
First                          Middle                          Last
Age: __________
Height: _____ Ft. _____ In.
Weight: __________ lbs.
Eyesight: L_____ / _____ R
Hearing: __________
Blood Pressure: _______/___________

Does applicant have any apparent disabilities?

Facial: ______________________________________
Pulmonary: _________________________________
Cardio Pulmonary: _________________________
Vascular: _________________________________
Abdomen: __________________________________
Genitourinary: __________________________
Musculoskeletal: _________________________
Other: _____________________________________

Has applicant ever suffered from injury: Yes ________ No ________

If so, When? _______________________________________________________________________________________

Describe: ____________________________________________________________________________________________

This applicant is free of any medical or physical conditions that would cause harm to him / her or any other firefighter(s)? Yes ________ No ________

Rejection is based on the following:

Remarks: ____________________________________________________________________________________________

__________________________________________________________________________________________________

I certify that as a practicing physician in the State of New Jersey, the applicant is free from any acute or chronic disease and has no physical defects that would hinder his/her ability to perform the duties of a firefighter.

Date Examined: ___________ Location of Examination: ________________________________

__________________________________________________________________________________________________

Address                          City                          State                          Zip Code

__________________________________________________________________________________________________

Last Updated: December 22, 2017
Purpose:
To define the criteria for the various classifications of volunteer membership within West Berlin Fire Rescue

Scope:
This procedure is applicable to all volunteer personnel.

Classifications:

- **Active Membership**: A member who maintains residency with Berlin Township or within 1 mile of the Township boundaries and who participates in emergency operations with West Berlin Fire Rescue is permitted to all privileges that go with active membership.

  Active members shall be invited to participate in all Department social functions; be issued Class “A” uniforms and paging equipment; be voting members of which they are assigned; and be issued a key fob for building access. Active members shall be responsible for maintaining the minimum training and participation levels for the position in which they serve as outlined in FIRE SOP’S.

  An active volunteer member will be considered as one of the following:

  - **Firefighter**: A person who primarily delivers service from within the ranks of the department. A firefighter can belong to one of the following categories

    o **Interior Firefighter**: Members who are involved in the physical activity of fire suppression and/or rescue inside of a building or enclosed structure. This individual dons breathing apparatus and becomes directly involved in the extinguishment of fires. You may be required to enter into confined and/or hazardous areas for the purpose of fire extinguishments and/or rescue. All firefighters shall be considered Interior Firefighters unless they meet criteria for External or Support Firefighters.

    o **Exterior Firefighter**: Members who are involved at an emergency operations buy who don not don breathing apparatus, or enter confined or other hazardous spaces. Apparatus operators, light and electrical cable runners, etc. are consider Exterior Firefighters. To be eligible for Exterior Firefighter, a member shall have served ten or more years as an Interior Firefighter, or have reached the age of fifty five (55) or have developed a medical condition that prevents them from participating as an Interior Firefighter.

    o **Support Firefighter**: Members who are involved at emergency operations only in support functions such as traffic control, photography, etc. To be eligible for Support Firefighter a member must have served twenty (20) or more years as either an Interior Firefighter or Exterior Firefighter, or reached the age of fifty five (55) or developed a medical condition that prevents them from participating as either an Interior or Exterior Firefighter.
Purpose:
To set a period of time during which newly appointed members will be evaluated for consideration from probationary to the rank of Firefighter.

Scope:
This procedure is applicable to all newly appointed members of the Fire Department.

Probationary Period:
For persons entering the Department who possess the current minimum training standards for their position the probationary period shall consist of a period of one (1) year from the date of appointment. Training to utilize various portable equipment and SCBA may be given so individuals can be quickly assimilated into the system.

For persons entering the Department who have had no previous experience or who do not possess the current minimum training standards for the position to which they have applied, the probationary period shall consist of a period of one (1) year from the date of appointment and the successful completion of the minimum training standards.

Fire Division personnel shall remain in the probationary status until they successfully complete minimum firefighter training standards referenced in SOP'S.

Members must meet the minimum training standards for their division within a two year period. Failure to comply with the minimum training standards within the two year period may result in dismissal from the department.

Probationary Period Restrictions:
During the probationary period, recruits shall be restricted from the following privileges:

- To operate any Fire Department vehicles, regardless of size. With special permission and under certain circumstances such as a schedule training event, a member under the age of 21 may operate a passenger vehicle.
- Key fob activation
- To obtain endorsement for a blue light permit
- To obtain a fire pager
- To obtain Class A or Class B uniforms (paid by district)
- To vote in company meetings
Recruit Evaluation:

At the end of the recruits one (1) year probationary period and or the satisfactory completion of the minimum training standard, the Chief, Fire Company President and the Recruitment/Retention Officer (RRO) shall evaluate the recruit for promotional consideration.

If the candidate has performed less than adequately during the probationary period, the Chief may elect to extend the period, but in no case shall the extension be longer than an additional six (6) months. At the end of that extension, a further evaluation shall be conducted by the Chief to take a course of action deemed appropriate.

If the Chief believes the candidate to be unsatisfactory for permanent appointment to the Department, a report must be submitted in writing to the Fire District detailing the conditions that were used to formulate the decision. If the Fire District agrees, a recommendation shall be made by the Board at a regular monthly meeting.

If the Chief believes the candidate to be acceptable for permanent assignments to the Department, a “Recruit Promotional Certificate” shall be completed by the Chief indicating the recruits recommended change in status and forwarded to the Board of Commissioners for their concurrence. Completed recruit promotional certificates shall be kept in the individual's personal file.

All recruit training and participation will be tracked and monitored by the RRO and or mentor. Continuous communications between recruits and the RRO and or mentor will be maintained in order to assure progress is documented.
Purpose:
The following requirements are designed to select able bodied persons for the rigors of emergency service work and therefore form the basic criteria into West Berlin Fire Rescue.

General Requirements:
Any person desiring to volunteer for Fire Department services must meet the following criteria:

- Must be at least 18 years of age
- Must be a resident of Berlin Township and live within 1 mile of the Township boundaries
- Must complete a general application for membership
- Must satisfactorily complete a doctors examination as performed by a licensed physician, including a drug test
- Must pass the appropriate physical agility test as outlined in this document
- Possess a valid New Jersey State drivers license
- Have not been convicted of a crime
- Document any past service or training

Applications:
Persons seeking entry into the Fire Department must submit their request on the appropriate West Berlin Fire application. Applications forms are available at the Department or by calling the Fire District Office (FDO) at 856-767-1839. Members receiving a request for an application shall supply the applicant with the appropriate form, shall take the time to explain the application process in detail to the perspective member and answer any questions.

Completed application may be returned to the station or to the FDO. Upon receipt of the application the FDO will check it for completeness.

Incomplete applications shall be returned to the applicant by mail with an explanation of corrective actions required.

Recruit Orientations:
Upon receipt of a properly completed application, the FDO will forward a recruit orientation form to the perspective member’s Fire Department Recruit/Retention Officer (RRO) or designee. That officer will be responsible for the completion of the recruit orientation segment of the membership process.

The recruit orientation is designed to provide an overview of the duties, training, and participation requirements that are expected of the applicant during his/her participation in the Fire Department. The Fire Department RRO and the applicant should each form an opinion as to whether the application process should be continued. Should they both agree to proceed, a Recruit Orientation Form shall be completed and signed.

After completing the recruit orientation the Fire Department RRO shall forward the completed recruit orientation form to the FDO who will initiate the background investigation segment of the process.
Background Investigation:

Upon receipt of a properly completed application form, the FDO will contact the N.J. State of Motor Vehicle and the Berlin Township Police Department to request a background information concerning the perspective member. The Prospective Member will sign a Release Form as part of their application package consenting to a background investigation. Failure to comply will result in the application being denied. The background investigation shall include a driver’s license abstract, fingerprinting, photo and criminal history check.

Persons found not to possess a valid New Jersey’s driver’s license shall be rejected for consideration as a member with this Department. Persons found to be holding an excessive number of points (greater than eight) will be subjected to an additional interview by the Fire Chief or his/ her designee.

Persons found to have a criminal record shall be removed from consideration as a member of this Department.

Physical Examination:

Upon receipt of a driver’s license abstract, the applicant will be required to contact a licensed physician to make arrangements for a physical examination. The applicant will also be required to pass a drug test.

When the results of the physical are received, the applicant will notify the FDO. If the results of the physical are satisfactory, the FDO will schedule the appropriate agility test. The appropriate division duty crew officer shall be notified and the agility test administered as soon as practical.

If the results of the physical are unsatisfactory, the applicant will notify the FDO. If an applicant is denied entry to the Department, the areas of deficiency shall be communicated to the applicant and suggestions for satisfying those. Such communication shall be documented on the application and all records received to this point will be retained on file.

Agility Test:

The physical agility test have been designed to measure a candidate’s ability to perform some of the basic tasks required of emergency responders performing routine duties. Each test consists of evolutions that must be performed as prescribed below, within the specific time limit. During this test the candidate is required to wear athletic clothing.

During the agility test, the person responsible for administrating the test shall carefully observe the candidate for signs of fatigue, which might impact the candidate’s personal safety. If such condition is observed, the test administrator shall stop the test.

If the candidate experience difficulty with any portion of the test, he/ she shall notify the examiners at once.

After completion of the agility test, the examiner will advise the applicant of the results. If the applicant failed the test, the examiner will inform the applicant where he/ she was deficient. The examiner will recommend and document on the Agility Test Form suggestions for satisfying those deficiencies. The examiner shall forward the results to the FDO.
The report shall include date and time of the test, applicants name, total elapsed time of completing all evolutions, statements indicating whether the evolutions were satisfactorily completed or not, and the examiner’s signature. If the results are satisfactory, the FAO will submit the applicant’s name to the Board for their approval.

**Fire Division Agility Test Evolutions:**

**Equipment needed:**
- 24’ extension ladder
- Rolled 50’ section of two and one-half inch hose
- 5/8 inch rope
- 14’ roof ladder
- 100’ of two and one-half inch hose
- Mast stream nozzle
- Rescue mannequin
- Engine

Prior to the test, the extension ladder shall be positioned and raised to the roof area, the rope will secure to the rolled 50’ section of 2 1/2" hos, the nozzle will be attached to the 100’ section of 2/12” hose and charged to 50 PSI at the engine discharge gauge. The mannequin will be placed on the ground lying face up.

**Maximum Allowable time to complete test: Five (5) Minutes**

- The candidate must climb a ladder approximately twenty-four feet above grade to the roof area. The candidate will ascend and descend the ladder in one continuous climbing motion, without any stops or hesitation. If the candidate has any problems while performing this task, he/she shall alert the examiners at once.
- The candidate will proceed to the hose hoist where he/she will hoist a rolled fifty-foot section of two and one-half inch (2 ½”) hose (approximately 70lbs) to the top of the hoisting mechanism using an attached 5/8” rope. After the hose roll reaches the hoisting mechanism the candidate will return the hose roll to the ground in a controlled manner. if the candidate has any problems while performing this task, he/she will alert the examining officer at once.
- The candidate will proceed from the hose hoist to the ladder raise evolution. In this portion of the test, the candidate will raise a fourteen foot aluminum fire service roof ladder from a flat position on the ground and place it so that it is ready to climb. The candidate may use any techniques that he/she desires to raise and position the ladder, as long as the techniques use appropriate safety precautions. If the candidate has any difficulty performing this evolution he/she should notify the examiners at once.
- The candidate will now proceed to the hose drag evolution. In this evolution the candidate must drag a charged one hundred foot section of two and one half inch (2 ½”) hose in a straight line for a distance of approximately seventy-five (75) feet. The hose line will be pressurized to fifty (50) PSI at the engine discharge gauge. The evolution be declared complete by the examiner when the nozzle crosses the seventy-five (75) ft. mark. If the candidate has any difficulty in performing this task, he/she should notify the examiners at once.
- In the last portion of the examination, the candidate will proceed from the hose drag to the rescue mannequin (weighs approximately 175 lbs.). The candidate will drag the mannequin in a straight line for a distance of fifteen (15) feet. The timing will stop once the entire mannequin has crossed the fifteen (15) foot marker. The
candidate may utilize any technique that he/she desires to carry or drag the mannequin. If the candidate has any problems while performing this task he/she should alert the examiners at once.

West Berlin Fire Rescue
Controlled Dangerous Substance Testing Policy

The Board of Fire Commissioners, Fire District No. 1, Berlin Township, Camden County, New Jersey, desires to provide a safe workplace and to promote health among firefighter personnel and employees, and to provide the citizens of Berlin Township with a commitment of public safety, health and welfare. The public trust is an essential element to the effective performance of any emergency service department. The Fire District’s goal and desire is to instill public confidence in the integrity of its firefighters. The Fire District resolves that all firefighters and employees must maintain a state of alertness and an ability to act in a rational manner with a clear thought process, which is unaffected by the use of any controlled dangerous substance. All firefighters and employees are expected to report to their duties and respond to fire alarms fit for duty and free from the use and effects of controlled dangerous substances. Because the use of controlled dangerous substance may affect the mental and physical condition of a firefighter and employee, the Fire District mandates full compliance with the provisions set forth in this policy directive. The signature of the firefighter or employee on file shows receipt of this directive and an agreement to comply with the contents fully.

Policy Directive

A. Pre-Placement Testing
All persons applying for the position of volunteer firefighter, career firefighter or other paid employee, must first undergo a urine drug screening test to determine the presence of a controlled dangerous substance. The urine drug screening test will be performed as part of the normal physical examination required for firefighter membership and employee approval. The results of the urine drug screening test will be reported and reviewed by the Chairman of the Board of Fire Commissioners, with the Vice Chairman as the alternate. All results will be kept confidential. Any person seeking the position of volunteer firefighter, career firefighter or other paid position, who refused to undergo a urine drug screening test, or who receives a positive test result for the presence of a controlled deadly substance, will be denied the position applied for.

B. Random Testing
Volunteer firefighters, career firefighters and other paid employees will undergo random urine drug screening tests. The tests will be performed by a medical provider appointed by the Fire District. Advance notice will not be provided. A minimum of 30% of the total active firefighters, career firefighters and other paid employees will be randomly tested annually. The names of those to be tested will be selected by the medical provider without intervention by or notice to the Fire District.

C. Reasonable Suspicion Testing
Upon reasonable suspicion reported to the board of Fire Commissioners by the Fire Chief, or his designee, that a volunteer firefighter, career firefighter or other paid employee is a user of a controlled dangerous substance, the board of Fire Commissioners shall direct that the individual undergo a urine drug screening test. Circumstances which may constitute a “reasonable suspicion” may include, but are not limited to the following:

1. Direct observation of the possession and/or use of a controlled dangerous substance
2. Being under any driver’s license suspension that may be related to the possession and/or use of a controlled substance.
3. Reporting to an alarm or assignment unfit for duty
4. An observed pattern of unusual, abnormal, erratic or unacceptable behavior usually attributed to the use of a controlled dangerous substance.

5. Information supplied by a reliable and credible source.

6. Physical and/or psychological characteristics associated with the use of a controlled dangerous substance.

D. Split Sample Testing
   Any individual receiving a positive test result from a drug screening test performed pursuant to sections A, B and C above, shall have the right to request that the split sample be tested at another lab facility. The cost will be borne by the individual requesting the additional testing.

E. Violations of the Policy
   Any volunteer firefighter, career firefighter or other paid employee who refuses to undergo a drug screening test, who receives a positive test result for the presence of a controlled dangerous substance or who has a confirmed adulterated specimen, will be immediately removed from all firematic duties and placed on suspension. A hearing date will be established so as to afford the individual, and his or her attorney, if represented, an opportunity to be heard. No action will be taken by the Board, beyond suspension, until the individual has had an opportunity to be heard. Refusal to attend the hearing will result in immediate dismissal. Unless it is determined that the presence of the controlled dangerous substance is the result of medical care. The member will have the option of either of the following for a first offense:

1. Enrollment within 30 days of the positive urine test result in a substance abuse rehabilitation program run by a certified substance abuse professional. Proof of enrollment and the certification of the S.A.P. must be provided to the Fire District. A negative Return to Duty screening test result, proof of which must be provided to the Fire District. Any and all costs included in and for the rehabilitation program, any required drug screening tests and or the return to duty test shall be the responsibility of the member. Y choosing this option, the member agrees to undergo additional urine drug test to be conducted during the random testing given to the company for a period up to two years after the completion of the rehabilitation program.

2. Dismissal from the company. Any individual who is dismissed by reason of drug screening test procedure will not be considered for membership approval or employment for a period of three years from the date of dismissal. A second offense will result in automatic dismissal from the Fire Company with no consideration for membership approval or employment for a period of three years from the date of dismissal.
West Berlin Fire Rescue
Adoption

This policy has been adopted by the Board of Fire Commissioners and may be amended from time to time by resolution at a meeting of the Board of Fire Commissioners of Fire District No. 1. This policy shall take effect immediately. A copy shall be maintained in the office of the Board of Fire Commissioners for firefighter, employee or public review. A copy shall be provided for the Fire Chief to be posted in the Fire House. Further, a copy shall be signed for by and given to each volunteer firefighter, career firefighter and other paid employee. The signature sheet will be kept on file in the office of the Board of Fire Commissioners. The signature implies that the volunteer firefighter, career firefighter or employee received, understands and will fully comply with the policy.

I _____________________________________________________________ (Print Name) have received, understand and will fully comply with the Controlled Dangerous Substance Testing Policy of the Fire District No. 1 of the Township of Berlin. I further understand the consequences of violating this policy.

Signature

Name