



## WHO SHOULD JOIN SEARCH AND RESCUE?

If you are someone who is interested in helping others and are willing to spend time doing it, then you may be a candidate for a Search and Rescue (SAR) team. Members of Black Diamond come from all walks of life and everyone plays an important role in the success of our team. All types of skills are useful, and everyone has something they can bring to the organization.

## REQUIREMENTS FOR MEMBERSHIP?

Successful completion of all on-line training modules, Basic First Aid and CPR certification, Successful completion of the SAR Academy, , maintaining training hours per year and willingness to participate in missions on a time-available basis is all that is currently required to remain an active member.

A member must be in good physical condition and able to perform in all types of terrain or weather.

Most individuals involved in SAR also join one of the member groups, such as K-9, Equine, or Wilderness Rescue Technician (WRT) but is not a requirement.

## WHAT IS THE SAR ACADEMY?

The basic course, Search Team Member (STM) is an entry-level field training designed to introduce the field responder to standardized practices for a search and rescue response. Course content includes an overview of the state system, legal concerns, SAR operations, search strategy & tactics, personal preparedness, wilderness survival, land navigation, and basic wilderness rescue. The STM course consists of approx. 60% classroom and 40% field instruction. Fieldwork is held regardless of current weather conditions unless extreme conditions present personal safety concerns. Successful completion prepares the student to function adequately as a Search Team Member under the direct supervision of a trained Search Team Leader.. This is a 40 hour course, held over two full weekends.

The Academy is really just the beginning of what you will eventually learn as a member of SAR.

## WHY SHOULD I JOIN SAR?

Being a member of SAR can be a very rewarding experience. Knowing that your efforts helped save someone's life is a feeling that is second to none. The program always needs more people willing to give their time for the sake of others. If you are interested in helping others, and if you are willing to give just a little of your time to provide that help, then SAR is for you.

## HOW DO I JOIN BLACK DIAMOND SEARCH AND RESCUE?

To join Black Diamond, complete all of the online course noted on page 3 of the application. Complete the application and submit it with copies of the completed on-line courses to [mmaggard@bdsarco.org](mailto:mmaggard@bdsarco.org). A background check will be conducted. After the background check has been cleared the applicant is placed on a one year probationary status. During the probationary period the candidate is required to complete first aid/CPR, S101 Body Fluid Exposure Training for SAR Responders and the basic academy. Probationary members must attend training and may respond to missions with a field training officer.



**Black Diamond Search and Rescue Council, Inc.  
Application and Background Investigation Authorization Form**

---

**In as much detail as possible tell us:**

**Why you would like to join Black Diamond Search and Rescue:**

---

---

---

---

---

---

---

---

**What are your goals once you become a member:**

---

---

---

---

---

**Are you interested in one of the specialty teams:**

- Yes
- No

**If yes**

- K9 Team
- Tracking
- Equine Team
- Technical - Vertical or Cave
- ATV
- Management

**Any prior SAR, public safety or military experience?**

- Yes
- No

If yes please elaborate.

---

---

---

---

---



**Black Diamond Search and Rescue Council, Inc.  
Application and Background Investigation Authorization Form**

BY COMPLETING THIS REQUEST AND AUTHORIZATION, I ACKNOWLEDGE THAT WILDERNESS SEARCH AND RESCUE TEAM MEMBERSHIP OF THE BLACK DIAMOND SEARCH AND RESCUE COUNCIL, INC. REPRESENTS THE PRIVILEGE OF SERVICE TO THE CITIZENS OF VIRGINIA. THIS PRIVILEGE MAY BE REVOKED OR SUSPENDED FOR VIOLATION OF LAW, OR AS A RESULT OF BEHAVIOR THAT MAY JEOPARDIZE SAFETY OR REFLECT UNFAVORABLY UPON THE COUNCIL.

**PLEASE PRINT ~ ALL SPACES MUST BE COMPLETELY FILLED OUT BEFORE MEMBERSHIP IS AUTHORIZED.**

**Applicant Information**

\_\_\_\_\_  
Applicant's Legal Last Name      Applicant's Legal First Name      MI      SS, DMV or Government ID Card Number

_____	_____	_____	_____	_____	_____	MM	DD	YYYY	Place of Birth County or City and State
Race	Gender	Hair Color	Eye Color	Height	Weight	Date of Birth			

**Your Current Mailing Address**

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City or Town of Residence      State      Zip

**Email Address Required**

\_\_\_\_\_  
Email will be the primary means for team communication

**Callout Information**

Home Telephone Number  Ok to use for Alert

Work Telephone Number  Ok to use for Alert

Cellular Telephone Number  Ok to use for text alert

Alternate Phone #  Ok to use for Alert

**Phone Numbers with a  checked box will be used for mission alerts, texts and / or email. If you do not want a number used for this, please leave the  box blank.**

**List First and Last Name of Persons 14 to 18 Years Old Requesting Membership**

_____ <i>First and Last Name</i>	_____ <i>First and Last Name</i>	_____ <i>First and Last Name</i>
Are you this child's parent or legal guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you this child's parent or legal guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you this child's parent or legal guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>The parent or legal guardian must provide notarized written approval for persons under 18 years old to participate in Council activities.</b>		

**SAR Reference Information (If Applying for Transfer)**

_____ Chairman/Coordinator's Name	_____ Chairman/Coordinator's Telephone Number	_____ Name of Current Organization
_____ Chairman/Coordinator's Address	_____ Applicant's Status: (In Good Standing, Current Training Logs, Suspended, Other)	_____ Address of Current Organization
<input type="checkbox"/> SAR Experience Information Form Attached		



**Black Diamond Search and Rescue Council, Inc.  
Application and Background Investigation Authorization Form**

**Conditions**

- YES  NO HAVE YOU BEEN CONVICTED OR FOUND GUILTY OF ANY CRIME, OFFENSE, OR REGULATORY VIOLATION, OR PARTICIPATED IN ANY OTHER PROHIBITED CONDUCT IDENTIFIED BY THE VIRGINIA OFFICE OF EMERGENCY SERVICES REGULATIONS? (SPECIFY ANY VIOLATION BELOW)
- YES  NO HAVE YOU BEEN CONVICTED OR FOUND GUILTY OF ANY CRIME INVOLVING SEXUAL MISCONDUCT WHERE THE LACK OF AFFIRMATIVE CONSENT BY THE VICTIM IS AN ELEMENT OF THE CRIME, SUCH AS FORCIBLE RAPE?
- YES  NO HAVE YOU BEEN CONVICTED OF A FELONY INVOLVING THE SEXUAL OR PHYSICAL ABUSE OF CHILDREN, THE ELDERLY OR INFIRM, SUCH AS SEXUAL MISCONDUCT WITH A CHILD, MAKING OR DISTRIBUTING CHILD PORNOGRAPHY, OR USING A CHILD IN A SEXUAL DISPLAY, INCEST INVOLVING A CHILD, ASSAULT ON AN ELDERLY OR INFIRM PERSON?
- YES  NO HAVE YOU BEEN CONVICTED OF A MISDEMEANOR INVOLVING IMPERSONATING AN OFFICER OR IMPERSONATING CERTAIN PUBLIC SAFETY PERSONNEL?
- YES  NO HAVE YOU BEEN CONVICTED OR FOUND GUILTY OF ANY CRIME (INCLUDING ABUSE, NEGLIGENCE, THEFT FROM OR FINANCIAL EXPLOITATION OF) A PERSON ENTRUSTED TO YOUR CARE OR PROTECTION IN WHICH THE VICTIM IS A PATIENT OR RESIDENT OF A HEALTH CARE FACILITY?
- YES  NO HAVE YOU BEEN CONVICTED OR FOUND GUILTY OF ANY OTHER ACT THAT IS A FELONY, (EXCEPT THE FELON IS ELIGIBLE FOR AFFILIATION FIVE YEARS AFTER THE DATE OF FINAL RELEASE IF NO ADDITIONAL FELONIES HAVE BEEN COMMITTED DURING THAT TIME)?
- YES  NO ARE YOU UNDER ANY DISCIPLINARY OR ENFORCEMENT ACTION FROM ANOTHER STATE EMS OFFICE OF OTHER RECOGNIZED STATE OR NATIONAL HEALTHCARE OR SEARCH AND RESCUE LICENSING OR CERTIFYING BODY? (PERSONNEL SUBJECT TO THESE DISCIPLINARY OR ENFORCEMENT ACTIONS MAY BE ELIGIBLE FOR AFFILIATION PROVIDING THERE HAVE BEEN NO FURTHER DISCIPLINARY OR ENFORCEMENT ACTIONS FOR FIVE YEARS PRIOR TO APPLICATION TO AFFILIATION WITH THE BLACK DIAMOND SEARCH AND RESCUE COUNCIL, INC.).
- YES  NO HAVE YOU BEEN SUBJECT TO A PERMANENT REVOCATION OF LICENSE OR CERTIFICATION BY ANOTHER STATE EMS OFFICE OR OTHER RECOGNIZED STATE OR NATIONAL HEALTHCARE OR SAR LICENSING OR CERTIFYING BODY?
- YES  NO I UNDERSTAND THAT ANY REFERENCES TO CRIMINAL ACTS OR CONVICTIONS UNDER THIS APPLICATION REFER TO SUBSTANTIALLY SIMILAR LAWS OR REGULATIONS OF ANY OTHER STATE OF THE UNITED STATES. CONVICTIONS INCLUDE PRIOR ADULT CONVICTIONS, JUVENILE CONVICTIONS, AND ADJUDICATIONS OF DELINQUENCY BASED ON AN OFFENSE THAT WOULD HAVE BEEN, AT THE TIME OF CONVICTION, A FELONY CONVICTION IF COMMITTED BY AN ADULT WITHIN OR OUTSIDE OF VIRGINIA.
- YES  NO I UNDERSTAND THAT I MAY NOT BE UNDER THE INFLUENCE OF ANY DRUGS OR INTOXICATING SUBSTANCES THAT MAY IMPAIR MY ABILITY TO PROVIDE PATIENT CARE OR OPERATE ANY MOTOR VEHICLE WHILE INVOLVED IN ANY TRAINING, MISSION, OR PUBLIC ACTIVITY OF THE BLACK DIAMOND SEARCH AND RESCUE COUNCIL, INC.
- YES  NO I AUTHORIZE THE BLACK DIAMOND SEARCH AND RESCUE COUNCIL, INC. TO VERIFY THE ACCURACY OF INFORMATION PROVIDED ON THIS FORM, AND AUTHORIZE CONDUCT OF A VIRGINIA CRIMINAL INFORMATION NETWORK (VCIN) RECORDS CHECK BY THE SHERIFF OF THE JURISDICTION.
- YES  NO I HAVE ATTACHED CERTIFICATES SHOWING SUCCESSFUL COMPLETION OF REQUIRED INCIDENT COMMAND SYSTEM AND NATIONAL INCIDENT MANAGEMENT SYSTEM (ICS-100 AND -200, IS-700, AND 800)
- YES  NO I UNDERSTAND THAT I AM EXPECTED TO COMPLETE CALLOUT QUALIFIED TRAINING OR SEARCH TEAM MEMBER CERTIFICATION WITHIN 12 MONTHS OF SUBMISSION OF THIS COMPLETED APPLICATION.
- YES  NO I UNDERSTAND THAT I AM EXPECTED TO MAINTAIN CURRENT FIRST AID AND CARDIO-PULMONARY RESUSCITATION CERTIFICATION WITH MY OTHER QUALIFICATIONS.
- YES  NO IF REQUESTING TRANSFER FROM ANOTHER SAR ORGANIZATION I UNDERSTAND THAT MY CERTIFICATION(S), OTHER QUALIFICATIONS, REFERENCES AND TRAINING RECORDS MUST BE VERIFIED.
- YES  NO I HAVE ATTACHED AN EXPLANATION FOR MY REQUEST TO TRANSFER FROM ANOTHER SAR ORGANIZATION TO BLACK DIAMOND.

**The above information is true and correct. By Signing, I understand that providing false information on this form is grounds for denying Membership. I have read and understand the above statements and consent to a background check being completed by the Virginia State Police.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



**Basic On-Line SAR Training**

**Must be submitted with the completed application**

**Applications without completed online courses will not be considered for membership**

The Federal Emergency Management Agency offers interactive training in search and emergency operations. These required programs are available on the internet, and printed certificates and transcripts are available upon successful completion of written examinations: go to <https://training.fema.gov/nims/>

<https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c>

IS-100.C Introduction to Incident Command System

<https://training.fema.gov/is/courseoverview.aspx?code=IS-200.b>

IS-200.b ICS for Single Resources and Initial Action Incidents

<https://training.fema.gov/is/courseoverview.aspx?code=IS-700.b>

IS-700.B National Incident Management System (NIMS), An Introduction

<https://training.fema.gov/is/courseoverview.aspx?code=IS-800.c>

IS-800.c National Response Framework, An Introduction

- |  |  |
|--|--|
| <input type="checkbox"/> Completed IS-100.C              | Must be completed and submitted with the application |
| <input type="checkbox"/> Completed IS-200.B              | Must be completed and submitted with the application |
| <input type="checkbox"/> Completed IS-700.B              | Must be completed and submitted with the application |
| <input type="checkbox"/> Completed IS-800.C              | Must be completed and submitted with the application |
| <input type="checkbox"/> Completed Basic CPR / First Aid | Must be completed prior to taking STM - SAR Academy  |