

COUNTY OF COCHISE
SHERIFF'S OFFICE
SEARCH AND RESCUE
205 N. JUDD DRIVE
BISBEE, ARIZONA 85603
(520) 353-5754

TO: Search and Rescue Applicants

FROM: David Noland, Search and Rescue Coordinator
Ursula Ritchie
Deputy Ian Williamson

RE: **APPLICATION PROCEDURES**

Thank you for your interest in the Cochise County Sheriff's Office Search and Rescue Posse. You must be at least 18 years of age, and the following criteria are to be used in making your application to Search and Rescue.

Please complete the attached application and return it to the Sheriff's Office Substation that you received it from.

The following items are also needed to complete your application and these need to be attached to your completed application:

1. Two passport sized photographs
2. One completed "applicant" fingerprint cards. (These can be completed at any Police Dept. or County Jail)
3. A copy of your driver's license or identification card

Upon successful completion of a background investigation and submission of the listed materials, you will be asked to attend a monthly SAR business meeting and meet the SAR Posse Command Staff for further consideration. Upon being accepted to the SAR Posse a training period will begin, the training and standards will be provided to you.

Thank you again for your interest in the Search and Rescue Posse,

David Noland
SAR Coordinator

EXPECTATIONS:

Due to the nature of Search and Rescue operations, it is of extreme importance that regular training is conducted, and members are outfitted with the proper equipment. To this end, regular training is a must and attendance rosters are kept.
Member's basic equipment will be inspected at regular intervals to ensure compliance with the minimums required.

You will be expected to attend training on a regular basis. This training takes place on the third Saturday of the month at various sites within the county. Specialized training, i.e.: technical rescue, K-9, mounted, divers, etc. is conducted on the first Saturday of the month, again at various sites. This is in addition to the monthly business meeting held on the first Thursday of each month at 5:30 p.m. at the Southeastern Arizona Regional Communications Center (SEACOM) which is located at 1728 Paseo San Luis Ave in Sierra Vista. There is a short training session before each meeting from 1730-1830 hrs.

New members will be placed on a 1-year probationary period and be given a temporary ID card. During this time the new member must demonstrate his/her professional intentions and capabilities to the organization. The new members **must** attend 70% of all meetings, training and missions during the probationary period. At the end of the probationary period, the SAR Manager, SAR Coordinators and training staff will evaluate the new member. If the new member has shown satisfactory attendance and performance, he/she will be given a permanent ID card and will be made a permanent SAR team member.

As a volunteer member of the Cochise County Sheriff's Office, a criminal history report **will** be completed as part of the application process. Applicants need to list any criminal history in the last question of Section #4. Any felony, DUI or drug convictions will be an immediate disqualification. There may be some mitigating circumstances and those will be looked at on a case-by-case basis.

MINIMUM REQUIRED EQUIPMENT:

The following is a guideline for new members and applicants. This is the **MINIMUM** equipment list for use as a member of a search and rescue team involved in land searches. This list is not all encompassing and is designed to give new members a basic idea of the minimum they will be expected to have shortly after acceptance into the SAR Posse. A complete list of equipment and technical rescue gear is contained in the Cochise County Sheriff's Office Search and Rescue Policy and Procedure manual, which new members will be issued.

The Sheriff's Office maintains a large cache of technical rescue gear. It is not the responsibility of the individual member to provide gear of this nature. The gear that will be provided by the members will be of a personal protective nature.

UNIFORM:

1. Long Sleeve silk screened shirt (volunteer purchased) and or issued reflective shirt.
2. Appropriate long pants for the weather conditions. **NO** shorts.
3. Sturdy, good quality leather field or hiking boots.
4. Protective helmet. ANSI/OSHA approved type.

EQUIPMENT:

1. Backpack (day or fanny style not approved) pack must be able to carry equipment and supplies for a minimum of 24 hours in the field.
2. Two Quart canteen
3. Compass
4. Flashlight and extra batteries
5. Poncho or appropriate rain gear
6. Emergency survival blanket
7. Food rations for 24 hours (MRE or similar)
8. Pen and waterproof paper
9. Personal first aid kit
10. Eye protection
11. Leather gloves
12. Whistle
13. Signal mirror
14. Matches in waterproof container
15. Pocketknife or multi-pliers type tool
16. Coil of parachute cord or heavy nylon line

Team members who desire to train and become proficient in technical rescue duties will be required to obtain equipment appropriate for those duties. A list of the equipment required will be discussed during training and provided to those members participating on the Technical Rescue Team.

COCHISE COUNTY SHERIFF'S OFFICE
VOLUNTEER APPLICATION

INSTRUCTRUCTIONS: PLEASE PRINT OR TYPE. If space is not sufficient, number your responses on the reverse side of the application and complete. Answer all questions fully and accurately. Check appropriate box below.

___I would like to volunteer my services as a member of the Search and Rescue Team and assist in any authorized local, state, national or international emergency.

A. I am available to attend required meeting and training sessions. ____(initial) I am available to respond to most search and rescue missions. ____(initial)

1. PERSONAL INFORMATION: DATE:_____

NAME:_____SSN:_____

OTHER NAMES USED:_____

DATE OF BIRTH:_____PLACE OF BIRTH:_____

____MALE ____FEMALE HEIGHT:_____ WEIGHT:_____ HAIR COLOR:_____ EYE:_____

DRIVERS LICENSE NUMBER_____STATE_____

CONTACT INFORMATION:

HOME PHONE NUMBER:_____ WORK NUMBER:_____

CELL NUMBER:_____ PAGER NUMBER:_____

EMAIL ADDRESS:_____

HOME ADDRESS:_____

_____

PREVIOUS ADDRESSES:_____

_____

MARITAL STATUS:_____**SPOUSES NAME:**_____

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (OTHER THAN SPOUSE):

_____

2. VEHICLES OWNED:

MAKE/MODEL:_____**YEAR:**_____

LICENSE NUMBER:_____**VIN:**_____

MAKE/MODEL:_____**YEAR:**_____

LICENSE NUMBER:_____**VIN:**_____

DO YOU HAVE AUTO INSURANCE?_____**COMPANY:**_____

POLICY NUMBER:_____**EXP. DATE:**_____

3. REFERENCES: LIST TWO PEOPLE, OTHER THAN RELATIVES, YOU HAVE KNOWN FOR AT LEAST TWO YEARS.

NAME:_____**PHONE NUMBER:**_____

ADDRESS:_____

NAME:_____ **PHONE NUMBER:**_____

ADDRESS:_____

4. GENERAL INFORMATION:

SPECIAL SKILLS TRAINING:_____

_____

LIST ANY CIVIC OR VOLUNTEER ORGANIZATION YOU ARE CURRENTLY A MEMBER OF:

_____

_____

WHY DO YOU WANT TO BE A VOLUNTEER FOR THE COCHISE COUNTY SHERIFF'S OFFICE?_____

_____

WHAT DO YOU FEEL YOU CAN CONTRIBUTE TO THE COCHISE COUNTY SHERIFF'S OFFICE._____

_____

_____

PLEASE PROVIDE CERTIFICATION DOCUMENTATION OR TRAINING RECORDS; ALSO PROVIDE ANY DOCUMENTATION YOU FEEL MAY SHOW YOUR EXPERIENCE.

IS THERE ANY OTHER INFORMATION YOU FEEL WOULD BE IMPORTANT FOR THIS AGENCY TO HAVE REGARDING YOUR APPLICATION AS A VOLUNTEER FOR THE COCHISE COUNTY SHERIFF'S OFFICE? _____

_____

_____

_____

_____

CERTIFICATION:

I CERTIFY THAT THE INFORMATION IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE:_____**DATE:**_____

COCHISE COUNTY SHERIFF'S OFFICE
VOLUNTEER APPLICATION
CONTINUATION SHEET

WHY DO YOU WANT TO JOIN THE SEARCH AND RESCUE TEAM?_____

_____

_____

_____

_____

_____

_____

WHAT DO YOU FEEL YOU CAN CONTRIBUTE TO THE SEARCH AND RESCUE TEAM?

_____

_____

_____

_____

_____

_____

EQUIPMENT:

PLEASE MARK THE ITEMS YOU POSESS AND ARE WILLING TO USE ON A SEARCH AND RESCUE MISSION.

EQUIPMENT	POSSESS		WILLING TO USE	
4 X 4 VEHICLE	Y	N	Y	N
RADIOS (HAM, ETC.)	Y	N	Y	N
ATV	Y	N	Y	N
HORSE AND HORSE TRAILER	Y	N	Y	N

TRAINING:

INDICATE THE LEVEL OF TRAINING OR EXPERIENCE IN THE FOLLOWING AREAS:

	EXPERT	CERTIFIED	SOME EXPERIENCE	INTEREST
FIRST AID				
CPR				
EMT				
IEMT				
PARAMEDIC				
MOUNTAINEERING				
MOUNTAIN RESCUE				
CAVING				
CAVE RESCUE				
HIKING				
SCUBA DIVING				
SEARCH (TECHNICAL)				
SEARCH (GENERAL)				
TRACKING				
SURVIVAL				
HORSEBACK RIDING				
OTHER				

_____

APPLICANT SIGNATURE_____**DATE**_____