



# CHELAN COUNTY EMERGENCY WORKER REGISTRATION INSTRUCTIONS

- 1. Complete the Emergency Worker Registration.
- 2. Sign and date WAC 118-04-200 Personal Responsibilities of Emergency Workers.
- 3. Sign the Waiver and Authorization to Release Information.
- 4. Specify the group you are affiliated with to be an emergency worker you need to have a group affiliation. (Example: SAR, Mountain Rescue, Red Cross, etc.)
- 5. Successfully complete IS-100 and IS-700. IS-100 can be found here: <a href="https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c">https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c</a> and IS-700 can be found here: <a href="https://training.fema.gov/is/courseoverview.aspx?code=IS-700.b">https://training.fema.gov/is/courseoverview.aspx?code=IS-700.b</a>
  Please note that a FEMA SID number is required in order to take the final exam and obtain your certificate. There is a link on the site under TAKE FINAL EXAM that takes to the area to get a SID number.
- 6. Successfully complete a CPR/First Aid Course
- 7. Get fingerprinted

Go to the Records Department of the Chelan County Sheriff's Office. They are open to do fingerprinting Monday – Thursday, 9 AM to 11:30 AM and 1:30 PM to 4:00 PM. Tell them you are applying to be an Emergency Worker with Chelan County. They are located at the Law and Justice Building at 401 Washington Street, Wenatchee. Enter the building on the second floor (in the breezeway). You will then go through Security after which you can take the elevator down to the Sheriff's Office Records (not Civil).

8. Return the application and copies of certificates of completion for IS-100, IS-700 and CPR/First Aid.

VIA Mail to:

Chelan County Sheriff's Office

**Emergency Management Division** 

401 Washington St. #1

Wenatchee, WA 98801

Or bring to the physical location of the Chelan County Emergency Management Office at:

206 Easy St (building behind the Fire Station)

Wenatchee, WA 98801

- 9. When your application and fingerprints are complete, we will run a background check. You will then receive a link to complete an online training for CJIS.
- 10. Please email a headshot to <a href="mailto:diana.owens@co.chelan.wa.us">diana.owens@co.chelan.wa.us</a>. This will be used to create your ID card. You can also come to the Emergency Management office at 206 Easy St. and have your picture taken there in place of emailing a photo if you prefer.

  Questions? Contact 509-667-6848, Tuesday-Friday 7 a.m. 4 p.m.

EMERGENCY WORKER REGISTRATION								
JURISDICTION: Che	elan County		ISSUE DATE:	REGISTRATION NO.				
NAME (LAST)		(FIRST)	(MIDDLE)	E-MAIL				
ADDRESS								
ADDRESS (MAILING)								
CITY			STATE	ZIP				
DRIVER'S LICENSE NUMBER			DATE OF BIRTH	BLOOD TYPE	SEX			
HEIGHT	WEIGHT	EYE COLOR	HAIR COLOR	ORGAN DONOR?				
PHYSICAL DISA	BILITIES (IF ANY)	SOCIAL SECURI	TY NUMBER					
HOME PHONE		WORK PHONE		CELL PHONE CARRIER				
GROUP AFFILIATION	I (SUCH AS SEARCH &	CAN YOU RECEIVE TEXT MESSAGES? Y N						
=	e information on	In case of Emergency						
,	edge and belief.	Please Notify						
Emergency Worker	Signature:	Name						
Date of Signature:				Telephone Number	with Area Code			
For Official Use	-	Relation						
ICS 100 ICS 7	00 FIRST AID							

## WAC 118-04-200 Personal Responsibilities of Emergency Workers:

- (1) Emergency workers shall be responsible to certify to the authorized officials registering them and using their services that they are aware of and will comply with all applicable responsibilities and requirements set forth in these rules.
  - (a) Emergency workers have the responsibility to notify the on-scene authorized official if they have been using any medical prescription or other drug that has the potential to render them impaired, unfit, or unable to carry out their emergency assignment.
  - (b) Participation by emergency workers in any mission, training event, or other authorized activity while under the influence of or while using narcotics or any illegal controlled substance is prohibited.
  - (c) Participation by emergency workers in any mission, training event, or other authorized activity while under the influence of alcohol is prohibited.
  - (d) Emergency workers participating in any mission, training event, or other authorized activity shall possess a valid operator's license if they are assigned to operate vehicles, vessels, or aircraft during the mission unless specifically directed otherwise by an authorized official in accordance with RCW 38.52.180. All emergency workers driving vehicles to or from a mission must possess a valid driver's license and required insurance.
  - (e) Use of private vehicles, vessels, boats, or aircraft by emergency workers in any mission, training event, or other authorized activity without liability insurance required by chapter 46.29 RCW is prohibited unless specifically directed otherwise by an authorized official in accordance with RCW 38.52.180.
  - (f) Emergency workers shall adhere to all applicable traffic regulations during any mission, training event, or other authorized activity. This provision does not apply to individuals who have completed the emergency vehicle operator course or the emergency vehicle accident prevention course and who are duly authorized under state law to use special driving skills and equipment and who do so at the direction of an authorized official.
- (2) Emergency workers have the responsibility to comply with all other requirements as determined by the authorized official using their services.
- (3) When reporting to the scene, emergency workers have the responsibility to inform the onscene authorized official whether they are mentally and physically fit for their assigned duties. Emergency workers reporting as not fit for currently assigned duties may request a less demanding assignment that is appropriate to their current capabilities.
- (4) Emergency workers have the responsibility to check in with the appropriate on-scene official and to complete all required recordkeeping and reporting.

I have read the above WAC (118-04-200) – Personal responsibilities of emergency workers.

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<b>~.</b>				
Signature			Date	
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## WAIVER and AUTHORIZATION TO RELEASE INFORMATION

I respectfully request and authorize you to furnish any law enforcement agency any and all information that you may have concerning me, my employment record, school record, military history, criminal record, and general reputation. Please include any and all medical, physical and mental records or reports, including all information of a confidential or privileged nature, and photocopies of the same if requested. This information will be used for the purpose of determining my eligibility for a volunteer position in the Chelan County Sheriff's Volunteer Services.

This waiver and authorization shall supersede any prior waiver, authorization, release or direction that I may have given you to the contrary concerning my records.

I understand my rights under Title 5, U.S.C., Section 552a, the Privacy Act of 1974, and waive those rights with the understanding that information furnished will be used by a law enforcement agency in conjunction with the volunteer process.

I hereby release you, your organization or others from any liability or damage which may or could result from furnishing the information requested above or from any subsequent use of such information in determining my qualifications as a volunteer within the Chelan County Sheriff's Volunteer Services.

Print Your Full Name	Date of Birth	Social Security Number
Signature	Address	<del></del>
If you are under 18 years of age, please h	ave your parent or	guardian sign below.
	•	pe required to commit time to this program in completed by the Chelan County Sheriff's
	Parent of:	
Signature	Date:	

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## **Automatic Disqualifiers**

### **DRIVING:**

- One or more criminal traffic convictions within the last three years (DUI, physical control, reckless driving, etc.)
- Suspension of driver's license within the past year
- Five or more moving violations within the past two years
- Two or more at-fault accidents within the past two years (will be reviewed on a case-by-case basis)
- Other: a negligent driving conviction (will be reviewed on a case-by-case basis)

### **DRUG USE:**

- Illegal drug/substance use or exposure within the past two years
- Illegal use of ANY controlled substance while employed in a criminal justice related capacity
- Other drug use outside these standards will be considered on a case-by-case basis
- No illegal sale of ANY drug, including marijuana
- Pattern of illegal use or sale of prescription medication
- Use of marijuana within the last year will be considered on a case-by-case basis

### **CRIMINAL ACTIVITY:**

- Any adult felony conviction
- Any misdemeanor or felony conviction(s) while employed in a criminal justice capacity
- Adult misdemeanor convictions will be carefully reviewed
- Juvenile felony convictions will be carefully reviewed
- Domestic Violence convictions of any type will be carefully reviewed
- Conviction for unlawful sexual activity

I have read and understand the Automatic Disqualifiers men and belief:	tioned above. To the best of my knowledge
I have NOT been convicted of any crime mentioned above.	☐ True ☐ False
I do NOT meet any of the disqualifiers above.	☐ True ☐ False
If you answered False, please explain:	
The Chelan County Sheriff's Office (CCSO) reserves the right	··
Emergency Worker status based on any of the above mentic	oned disqualifiers, and/or any other

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pertinent information obtained during the background investigation which would demonstrate the individual does not meet the core values of our agency – Integrity, Teamwork, and Excellence.