

Volunteer Training Request

**Completed and signed training request can be faxed to:
Rockingham County Fire Rescue – Training Division (540) 564-1823**

Name: _____ Agency _____ Date: _____

Home Phone: _____ Cell Phone: _____ Pager # _____

Class/ Course Title: _____ Course Dates: _____

Location: _____

Expenses:	Amount Requested	Approved
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Registration fee:	_____	_____
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Textbooks:	_____	_____
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Justification for attending training: _____

I understand that it is my responsibility to attend the above class if notified that I have been accepted. If it become necessary to withdraw from the class I will do so before the registration deadline. If a valid reason arises to withdraw after the registration deadline I will do so as soon as I know I will be unable to attend. If I am unable to complete the class I will make notification as soon as possible. Notification of withdrawal will be made to the Fire Rescue office in writing. I understand that failure to follow the above withdrawal procedure will result in me being billed by Rockingham County for the full cost associated with the class.

Applicant signature: _____ Date: _____

Volunteer Agency's Approval

Volunteer Agency Approval: _____ Title: _____ Date: _____

Comments: _____

OFFICE USE ONLY

Date received: _____ Enrolled in Class: _____ YES _____ NO

Reviewed by: _____ Date: _____

Procedure for County Funding of Training for Volunteers

Purpose: The purpose of this procedure is to detail the process by which a volunteer member of a county fire or rescue agency may participate in county sponsored training at no cost to the volunteer. This procedure will help ensure the most efficient use of available training resources. This procedure is not intended to prevent any volunteer member from registering in any class by paying the appropriate fees.

Procedure:

Class Registration: Any volunteer desiring to have the county cover the cost of any county sponsored training shall complete the volunteer training request form. This form will then be forwarded to the volunteer's chief or training officer (as determined by the agency) for approval then forwarded to the Fire and Rescue administrative office. The form will be reviewed and then returned to the volunteer member.

Volunteer Agency's Responsibility: It shall be the volunteer agency's responsibility to review the members request to determine if the training is appropriate for the member, based on their level of training and experience, and to complete their portion of the volunteer training request form.

County's Responsibility: It shall be the responsibility of Rockingham County Fire and Rescue to review the training request upon receipt and notify the volunteer if they have been accepted into the class. Notification will typically be made within 72 hours of receiving the training request. Space will generally be available on a first come first serve basis.

Volunteer Member's Responsibility: It shall be the responsibility of the volunteer member to complete any training class he/she is accepted into. If it become necessary for the member to withdraw from the class this should be done no later than the registration deadline. If a valid reason arises to withdraw after the registration deadline, notification shall be made to the Fire and Rescue administrative office as soon as it is known that the member will be unable to attend the training. If a volunteer is unable to complete a class because of a valid reason the volunteer member shall notify the Fire and Rescue administrative office as soon as it is known that the member will be unable to complete the class. Notification of withdrawal shall be made to the Fire and Rescue administrative office in writing. Valid reasons for withdrawal include, but are not limited to work schedule conflict, illness and change in status in volunteer agency. **Failure to follow the above procedure for withdrawing from a class will result in the member being invoiced by Rockingham County for the full cost associated with the class.**