



Greenwood Lake Volunteer Ambulance Corps.  
74 Windermere Ave  
P.O.Box 223  
Greenwood Lake, NY 10925

Application for Membership  
(Please type or print)

**Personal Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Phone Carrier: \_\_\_\_\_

|                                     |  |
|-------------------------------------|--|
| <b>Years at Present Address:</b>    |  |
| <b>Date of Birth:</b>               |  |
| <b>Drivers License ID#:</b>         |  |
| <b>Social Security #:(optional)</b> |  |

Previous Address (if less than 5 years at present): \_\_\_\_\_

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**Contacts**

|                                 |  |
|---------------------------------|--|
| <b>Closest Living Relative:</b> |  |
| <b>Relationship:</b>            |  |
| <b>Address:</b>                 |  |
| <b>Phone:</b>                   |  |

**Character References**

(please provide three references residing in Orange County. Do NOT use relatives)

| <b>Name</b> | <b>Address</b> | <b>Phone</b> |
|-------------|----------------|--------------|
|             |                |              |
|             |                |              |
|             |                |              |

**Employment**

|                                    |  |
|------------------------------------|--|
| <b>Employer:</b>                   |  |
| <b>Address:</b>                    |  |
| <b>Telephone:</b>                  |  |
| <b>Supervisor:</b>                 |  |
| <b>Nature of Work:</b>             |  |
| <b>How long employed by above:</b> |  |

**Please answer all of the following questions.**

(Give detail if you answer yes to any question. All information will remain confidential.)

1. Have you ever been convicted of a felony?

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2. Have you ever been convicted of an alcohol or substance abuse misdemeanor?

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3. Has your driver's license ever been suspected or revoked?

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4. Do you have experience in the medical or emergency medical services field?

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5. Are you currently any of the following?

| <b>Certification</b> | <b>Expiration Date</b> |
|----------------------|------------------------|
| EMTB                 |                        |
| First Responder      |                        |
| Basic First Aid      |                        |
| CPR                  |                        |

6. Potential Availability - what is your potential availability for volunteer shifts? Please check all that may apply.

| <b>Crew Type</b>                 | <b>Availability</b> |
|----------------------------------|---------------------|
| Weekday (7A-7P)                  |                     |
| Weeknight (7P-7A)                |                     |
| Weekend (24-hr rotational 7A-7A) |                     |

I understand that any false or misleading statements with respect to this application may result in the denial or termination of membership. I agree, if accepted, to participate in all required classes or training exercises and meetings which shall be deemed necessary by the Officers of the Greenwood Lake Ambulance Corps. I further understand that I am volunteering my services and I will receive no compensation for my services.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Notices to Applicant**

Membership in the Greenwood Lake Ambulance Corps is contingent upon the satisfactory completion of a physical examination conducted by the Corps physician. If you elect to have another physician perform the exam, you shall bear its cost.

The physical examination will be a standard medical physical and will include drug screening. If test results are positive in a manner indicating alcohol or drug dependence you will not be considered for membership unless documentation is provided by your attending physician that you are currently under his care and are taking prescription drugs and treatment that could cause the test results.

Your employer may be contacted and/or a police record check may be performed to verify your responses in this application. Your signature and submission of this membership application signifies your acceptance of the actions described in this Notice to Applicant.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

If accepted as a volunteer member, equipment will be given to you for your use through your tenure as a member. Equipment given to you during this time includes, but is not limited to: shield, identification badge, radio(s) with accompanying charging station and cord, first aid bag and identifying clothing (jumpsuit, jacket, T-shirts, dress uniform, etc.). Upon your termination or departure, all equipment is to be returned in fully operating condition within 48 hours. Failure to comply will be considered a theft of property and you will be prosecuted to the fullest extent of the law.

Your signature below indicates your understanding and acceptance of this provision.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

EMS agencies in NYS are required by law (Executive Law Section 837-s) to check applicants (who may be involved in the care or transportation of patients) personally identifying information against the Sex Offender Registry and make a determination of eligibility to become a member/employee pursuant to Correction Law Article 23-A.

Attached are copies of the bill and Article 23-A of the Correction Law.

Your signature below indicates that a copy of Article 23-A of the Correction Law has been provided to you and you consent to your information being checked against the Sex Offender Registry. Agencies must make eligibility for membership determinations consistent with Article 23-A and your non-signature would preclude you from being eligible for membership.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## **Executive Law Section 837-s**

### **Executive**

\* § 837-s. Search for sex offense conviction records of emergency medical technician and other first responder applicants. 1. The chief officer of any volunteer ambulance company, as such term is defined in subdivision two of section three of the volunteer ambulance workers' benefit law, any proprietary ambulance service, or any other ambulance or emergency medical service providing emergency medical care and transportation of sick or injured persons to health care facilities, shall notify every new applicant for emergency medical technician, paramedic, certified first responder applicant, or any other applicant who would be responsible for providing emergency medical care and transportation of sick or injured persons to health care facilities, including applicants seeking to transfer from one ambulance company or service to another, that their personally identifying information will be checked against the public records of those individuals required to register under article six-C of the correction law.

2. If such applicant desires to proceed, within ten business days of receiving an application, the chief officer shall inquire of the division as to whether such applicant is required to register by calling the special telephone number established pursuant to section one hundred sixty-eight-p of the correction law. Such chief officer may also check the internet posting subdirectory of level two and three sex offenders established pursuant to section one hundred sixty-eight-q of the correction law.

3. Where such search reveals that an applicant is registered under article six-C of the correction law, the chief officer of the ambulance company or service shall determine whether or not such person shall be eligible to be elected or otherwise appointed as a member of such ambulance company or service. Such determination shall be made consistent with article twenty-three-A of the correction law and a copy of such article shall be provided to the applicant.

\* NB Effective March 14, 2017

#### **NEW YORK CORRECTION LAW**

#### **ARTICLE 23-A**

#### **LICENSURE AND EMPLOYMENT OF PERSONS PREVIOUSLY CONVICTED OF ONE OR MORE CRIMINAL OFFENSES**

#### **Section 750. Definitions.**

#### **751. Applicability.**

#### **752. Unfair discrimination against persons previously convicted of one or more criminal offenses prohibited.**

#### **753. Factors to be considered concerning a previous criminal conviction; presumption.**

#### **754. Written statement upon denial of license or employment.**

#### **755. Enforcement.**

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**§750. Definitions.** For the purposes of this article, the following terms shall have the following meanings:

(1) "Public agency" means the state or any local subdivision thereof, or any state or local department, agency, board or commission.

(2) "Private employer" means any person, company, corporation, labor organization or association which employs ten or more persons.

(3) "Direct relationship" means that the nature of criminal conduct for which the person was convicted has a direct bearing on his fitness or ability to perform one or more of the duties or responsibilities necessarily related to the license, opportunity, or job in question.

(4) "License" means any certificate, license, permit or grant of permission required by the laws of this state, its political subdivisions or instrumentalities as a condition for the lawful practice of any occupation, employment, trade, vocation, business, or profession. Provided, however, that "license" shall not, for the purposes of this article, include any license or permit to own, possess, carry, or fire any explosive, pistol, handgun, rifle, shotgun, or other firearm.

(5) "Employment" means any occupation, vocation or employment, or any form of vocational or educational training. Provided, however, that "employment" shall not, for the purposes of this article, include membership in any law enforcement agency.

**§751. Applicability.** The provisions of this article shall apply to any application by any person for a license or employment at any public or private employer, who has previously been convicted of one or more criminal offenses in this state or in any other jurisdiction, and to any license or employment held by any person whose conviction of one or more criminal offenses in this state or in any other jurisdiction preceded such employment or granting of a license, except where a mandatory forfeiture, disability or bar to employment is imposed by law, and has not been removed by an executive pardon, certificate of relief from disabilities or certificate of good conduct. Nothing in this article shall be construed to affect any right an employer may have with respect to an intentional misrepresentation in connection with an application for employment made by a prospective employee or previously made by a current employee.

**§752. Unfair discrimination against persons previously convicted of one or more criminal offenses prohibited.** No application for any license or employment, and no employment or license held by an individual, to which the provisions of this article are applicable, shall be denied or acted upon adversely by reason of the individual's having been previously convicted of one or more criminal offenses, or by reason of a finding of lack of "good moral character" when such finding is based upon the fact that the individual has previously been convicted of one or more criminal offenses, unless:

(1) There is a direct relationship between one or more of the previous criminal offenses and the specific license or employment sought or held by the individual; or

(2) the issuance or continuation of the license or the granting or

continuation of the employment would involve an unreasonable risk to property or to the safety or welfare of specific individuals or the general public.

**§753. Factors to be considered concerning a previous criminal conviction; presumption.**

1. In making a determination pursuant to section seven hundred fifty-two of this chapter, the public agency or private employer shall consider the following factors:

(a) The public policy of this state, as expressed in this act, to encourage the licensure and employment of persons previously convicted of one or more criminal offenses.

(b) The specific duties and responsibilities necessarily related to the license or employment sought or held by the person.

(c) The bearing, if any, the criminal offense or offenses for which the person was previously convicted will have on his fitness or ability to perform one or more such duties or responsibilities.

(d) The time which has elapsed since the occurrence of the criminal offense or offenses.

(e) The age of the person at the time of occurrence of the criminal offense or offenses.

(f) The seriousness of the offense or offenses.

(g) Any information produced by the person, or produced on his behalf, in regard to his rehabilitation and good conduct.

(h) The legitimate interest of the public agency or private employer in protecting property, and the safety and welfare of specific individuals or the general public.

2. In making a determination pursuant to section seven hundred fifty-two of this chapter, the public agency or private employer shall also give consideration to a certificate of relief from disabilities or a certificate of good conduct issued to the applicant, which certificate shall create a presumption of rehabilitation in regard to the offense or offenses specified therein.

**§754. Written statement upon denial of license or employment.** At the request of any person previously convicted of one or more criminal offenses who has been denied a license or employment, a public agency or private employer shall provide, within thirty days of a request, a written statement setting forth the reasons for such denial.

**§755. Enforcement.** 1. In relation to actions by public agencies, the provisions of this article shall be enforceable by a proceeding brought pursuant to article seventy-eight of the civil practice law and rules.

2. In relation to actions by private employers, the provisions of this article shall be enforceable by the division of human rights pursuant to the powers and procedures set forth in article fifteen of the executive law, and, concurrently, by the New York city commission on human rights.

Any person over the age of 18 years and is a resident of our is employed in the territorial limits of the Greenwood Lake Ambulance Tax District for a period of (1) one year or more shall be eligible for active membership.

Fill out this application and return it to the address on page 1. You will be contacted for an interview following our monthly meeting. This could take several weeks depending on when we receive your application. If you have any questions please call (845) 477-2200. You may need to leave a message on the answering machine and await a call back from a member.

Thank you.