### **Applying and the Selection Process**

Joining the Newmarket MedVent / MedRover Team has several steps to help us create a well balanced, cohesive, highly functioning team where each member is equally vital to the success of the entire team. Each step of the process, after the completion of the application form, requires an invitation from the Recruitment Team to participate in the next stage. Only those candidates moving forward in the application process will receive an invitation to the next stage. Candidates unsuccessful at any stage may be placed on a call back list should additional spots become available on the team.

#### **Step 1 - Application Form**

Each interested candidate completes an Application Form. This is reviewed by the Recruitment Team who will select successful candidates and inform them they are onto to the next stage.

### **Step 2 - Selection Camp**

Successful applicants will be invited to a **mandatory** weekend Selection Camp. Candidates unable to attend the full camp will be placed on a call-back list for future recruitments.

Attendance and participation at the selection camp does not guarantee a place on the team. The goal of the camp is to select a team who will work well together and are a good fit. No prior first aid training or experience is required or expected at the camp. Activities will be centered on teamwork, communication, problem solving, ethical decisions, planning and time management etc. Activities will include individual and group interviews (with the Recruitment Team), small and large group activities, discussions, games, challenges and assignments.

The camp will be an overnight weekend camp with planned sessions during the day and evening hours. Everyone will be involved in camp duties (e.g.: meal prep, clean up etc..) throughout the weekend, including final clean up and packing of camp.

A detailed Pre-camp package will be sent out to all invitees including any preparation required.

All those 18yrs and older WILL require a valid Police Reference Check (PRC) with Vulnerable Sector Screening (VSS) to be brought to camp – this can take several weeks to obtain from your local police station so applicants are advised to start this process well in advance, even before invitation to the camp.

\*\* those who <u>are not members of Scouts Canada will need to sign a Hold harmless prior to attending camp\*\*</u>

Transportation to and from the camp is each person's responsibility. The camp is located in York Region in the Stouffville area. Group accommodations in a cabin on bunk beds and all meals are provided at no cost to the candidates.

### Step 3 - Invitation

Only those selected to join the team will receive an invitation. Everyone else will be notified and placed on a call-back list for future recruitment. The team is recruiting a maximum of 20 members.

Once a team member accepts the invitation, a new member package will be sent to them.

#### Step 4 - Joining

All team members will be required to register as members of Scouts Canada. This process and requirements will be included in the joining invitation.

Team members will receive instructions for obtaining their uniform and team first aid kit. It will be each member's responsibility to ensure they obtain and wear a full, properly fitting uniform for the first session. Uniforms can take up to 2 weeks for fitting.

There are several online training programs members will be required to complete. Access to these and the dates they are due will be explained in the Invitation Package.

Dates for any face-to-face sessions will also be included and members expected to attend as per the attendance and punctuality expectations outlined.

Any documents, such a prior first aid certifications or copies of training certificates, will be identified along with the dates and formats in which they are required.

# 1<sup>st</sup> York Region Paramedic Services Medical Venturers & Medical Rovers

## **Participant Application**

# **Personal Information:** Full Name (Last name, First name): Date of Birth (MM/DD/YYYY): \_\_\_\_\_/\_\_\_\_ Full Name of Parent/ Guardian: \_\_\_\_\_ Address: \_\_\_\_\_\_\_ Postal Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ **Certifications / Education:** Do you possess a valid Red Cross /St. John's / Life Saving first aid certification (If yes, what level & expiry)? Secondary School Attended: \_\_\_\_\_ Secondary School Completed: YES or NO Post Secondary School Attended: \_\_\_\_\_\_ Post Secondary School Completed (What type of Certification, Degree, Diploma etc.)? Other Workshops, Courses, Certifications etc. (List all):

## **Employment History:**

### **Current or Most Recent Employer:**

Name of Employer:
Address:
Type of Work:
Supervisor Name:
Supervisor Phone Number:
Your Job Title:
Usual Hours / Number of Shifts per Week:
May we contact them for a Reference? YES or NO
Previous Employer:
Name of Employer:
Address:
Type of Work:
Supervisor Name:
Supervisor Phone Number:
May we contact them for a Reference? YES or NO
Your Job Title:
<u>Volunteer History:</u>
Current / Most Recent:
Name of Organization:
Address:
Type of Work:
Supervisor Name:
Supervisor Phone Number:
Usual Hours / Number of Shifts per Week:
May we contact them for a Reference? YES or NO

<u>Previous:</u>
Name of Organization:
Address:
Type of Work:
Supervisor Name:
Supervisor Phone Number:
May we contact them for a Reference? YES or NO
Extra-Curricular Activities:
Are you currently involved with any Scouts Canada / Guiding group? YES or NO
Group(s):
Prior Scouting Involvement? YES or NO Groups(s):
Reason(s) for leaving (if not currently involved:
Please list any teams or clubs you are or have been involved in and hours per week spent on them (Please include years if applicable):
Please list any hobbies / activities you participate in and hours per week spent on them:

Additional Details:
Please tell us about your personal interests:
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NAVInch medical constraints and in the BAL al Venture and 2
What makes you interested in the MedVent program?
What would you like to get out of the MedVent program?
Please provide us with any other relevant information regarding yourself (second languages, special skills,
certifications, training etc.):
How did you hear about our group?

Do you know any current or former members of the MedVent program? Please list names and their relationship to you:		
References:		
Please provide the names and contact numbers for 3 reference only one reference can be a family member.	es and their relationship to you. Please note,	
1. Name:	<del></del>	
Phone Number:		
E-mail address:		
Relationship:		
2. Name:		
Phone Number:		
E-mail address:		
Relationship:		
3. Name:		
Phone Number:		
E-mail address:		
Relationship:		
Do we have permission to contact your references?		
Declaration:		
I declare the information in this application to be true and compacknowledge that false information may exclude me from partic from consideration in the future. I understand that this applicate be declined from further consideration at any time during the application.	icipation in the program and may exclude me tion is part of a competitive process and I may	
Signature of Applicant:		
Date:		