



CITY OF LUCAS FIRE-RESCUE

VOLUNTEER EMERGENCY RESPONDER

OPPORTUNITY



The purposes of the Volunteer Emergency Responder (VER) program at the City of Lucas Fire-Rescue is to augment our full-time staffing requirements and to provide leadership and training opportunities for our full time personnel to train VERs in preparation for potential opportunities in the fire and/or EMS services.

Lucas Fire-Rescue is currently accepting applications for our VER program. Requirements for the VER program are 1) TCFP and DSHS Certified, or 2) DSHS EMT-Basic or higher Certified.

If interested, please review and complete the City of Lucas Fire-Rescue volunteer emergency responder expectations and application. The completed forms along with copies of any relevant certifications can be emailed, faxed, mailed, or hand delivered to the City of Lucas Fire-Rescue administration office.

If you have any questions about the department or the application process, please feel free to contact the City of Lucas Fire-Rescue or visit the City of Lucas website www.lucastexas.us.

City of Lucas Fire-Rescue
165 Country Club Road
Lucas, Texas 75002
Phone: 972-727-1242
Fax: 972-727-8317
Email: DStevens@lucastexas.us



CITY OF LUCAS
Fire-Rescue Volunteer Emergency Responder (VER)
Stipend Program
LFR SOG#05-13



General Requirements

Volunteer Emergency Responders (VERs) in good standing as determined by the Memorandum of Understanding are eligible to receive a stipend in accordance with program guidelines.

Regulations

The Department of Labor (DOL) is the federal agency tasked with enacting regulations interpreting the FLSA, and it is likewise charged with enforcing the FLSA. The DOL has issued two Wage & Hour Letter Rulings (FLSA2006-28 and FLSA2008-15) regarding firefighting and volunteers and has enacted regulations 29 CFR §553.101 and 553.103 to provide guidance. Federal regulation 29 CFR §553.106 addresses the issue of what constitutes a permissible payment to volunteers. A person may be paid expenses, reasonable benefits, a nominal fee, or any combination thereof, without losing his/her status as a volunteer. FLSA2006-28 set out the criteria to determine when an individual is a volunteer, and not an employee, of a public agency:

- 1) Performs hours of service for a public agency for civic, charitable, or humanitarian reasons, without promise, expectation, or receipt of compensation for services rendered. Although a volunteer can receive no compensation, a volunteer can be paid expenses, reasonable benefits, or a nominal fee to perform such services;
- 2) Offers services freely and without pressure or coercion, direct or implied, from an employer; and
- 3) Is not otherwise employed by the same public agency to perform the same type of services as those for which the individual proposes to volunteer.

A nominal fee is not a substitute for compensation and must not be tied to productivity. The DOL will presume the fee paid is nominal if the fee does not exceed 20 percent of what the public agency would otherwise pay to hire a full-time employee for the same services.

Eligibility

To participate in the Stipend Program, VERs in good standing shall agree to the following:

- 1) Sign up for shift(s) in the Fire-Rescue scheduling software by the 15th of the current month for the next month's schedule.
- 2) Once you sign up for a shift/event, it is your responsibility to be at that shift/event or find a replacement and notify the shift officer at least 24 hours in advance.
- 3) The following nominal fees (stipends) include:
 - o Day shift = \$100
 - o Night Shift = \$75
 - o External Agency Events (per occurrence outside of scheduled shifts) = \$50
 - o City of Lucas Special Events (per occurrence outside of scheduled shifts) = \$50
- 4) If you sign up for a shift and there is an event during the shift, you may be assigned to cover the event. This does not include additional nominal fees (stipends) for covering External Agency Events or City of Lucas Special Events during a scheduled shift.

Effective Date: August 1, 2023



Joni Clarke, City Manager



City of Lucas Fire-Rescue
VOLUNTEER EMERGENCY RESPONDER
Application



Instructions:

Complete the application and do not leave any questions blank. If questions are not applicable, enter "NA". If space is not insufficient attachments are acceptable. Sign completed form and return via email to dstevens@lucastexas.us.

Name: (Last)	(First)	(Middle)
Address: (Street/City/State/Zip)		
Email Address:		
Home Phone:	Cell:	Work:
Driver's License Number/State Issued:		
Date of Birth: (Must be 18 years of age)		

Select the shifts you are available to volunteer:			
	Yes	No	Comments
7 am – 7 pm			
7 pm – 7 am			
Weekday			
Weekend			
Other:			

Emergency Contact Information		
Name:	Relationship:	
Address: (Street/City/State/Zip)		
Home Phone:	Cell:	Work:

Employment History	
Current Employer:	
Address: (Street/City/State/Zip)	
Phone Number:	Start Date:
Previous Employer: (If current employer less than two years)	
Address: (Street/City/State/Zip)	
Phone Number:	Start Date:

Education	
Name:	
Type of School:	
Address: (Street/City/State/Zip)	
Dates of Attendance – From:	To:
Diploma/Degree/Certificate/License:	

Certification				
	Yes	No	Date Expires	Level/Comments
DSHS				
TCFP				
SFFMA				
CPR				
Other				
Other				

Experience (List any previous Fire Service or EMS experience)		
Location/Entity	Date From	Date To

Skills/Qualifications

(List any skills you have that might benefit the City of Lucas Fire-Rescue. (i.e., auto mechanic, computer, construction trades, foreign language skills)

Have you ever been convicted, currently charged, awaiting trial, or on probation for any criminal offense?

☐ No ☐ Yes (If you answered yes, please explain below:

References

(Please provide three references)

Name: (Last)	(First)	(Middle)
Address: (Street/City/State/Zip)		
Email Address:		
Home Phone:	Cell:	Work:
Name: (Last)	(First)	(Middle)
Address: (Street/City/State/Zip)		
Email Address:		
Home Phone:	Cell:	Work:
Name: (Last)	(First)	(Middle)
Address: (Street/City/State/Zip)		
Email Address:		
Home Phone:	Cell:	Work:

Attachments:

Attach photocopies of any training records that may relate to emergency services, state license to practice emergency medical care, firefighter certification, or any other licenses and certifications.

Signing below indicates your understanding and acceptance of the following statements:

1. I certify that all the information provided by me in connection with this application is true and complete, and that I understand that any misstatement, falsification, or omission of information may be grounds for rejection of the applicant.
2. I understand that the City of Lucas Fire-Rescue or their agents will check with the Texas Department of Public Safety or other law enforcement agencies to verify driving or other records in accordance with applicable statutes.
3. I authorize any persons or organizations referenced in this application to give the City of Lucas all information concerning my previous or current employment, education, or other information. I release all such parties from all liability of any damages that may result from furnishing such information to the City of Lucas.

Signature	
Name:	Date: