



Border Search and Rescue Unit

Questionnaire For Prospective Members

www.bordersar.org.uk



Thank you for your interest in joining the team. Please fill in the following form and return it to the team secretary at the address below. Your application will be considered by our training committee and the secretary will write to you in due course.

Section 1: Personal Details

Title: _____ Date of Birth: _____

First Name: _____ Surname: _____

Home Address: _____ Home Tel: _____

_____ Mobile Tel: _____

Postcode: _____ e-mail address: _____

Section 2: Work Details

Employer: _____ Job / Post: _____

Work Tel: _____

Section 3: Next of Kin Details

Name: _____ Relationship: _____

Address*: _____ Telephone*: _____

Postcode: _____ ** If different from section 1*

Section 4: Other Details

Do you suffer from any medical conditions? Yes No *If Yes, Please State: _____*

Do you have your own transport? Yes No

Do you know any current members of the unit? Yes No *If so, who?: _____*

PTO

Section 5: Commitment & Availability

A high level of commitment is required by the Unit as it can obviously be called out at any time of day or night usually without much - if any - notice. In addition to call-outs the Unit meets once a month, trains once a month and has an exercise once a month. **Please circle** the answer below which would best describe your availability.

- Are you prepared/allowed/able to attend incidents during working hours?
Yes, anytime **Usually, work permitting** **Occasionally** **No**
- Are you prepared to attend regular Unit meetings once a month? (normally first Thursday of the month 19:30 till 21:30)
Yes(8 out of 10) **Sometimes(6 out of 10)** **Infrequently (4 out of 10)** **No**
- Are you prepared to attend regular Unit training once a month? (normally third Thursday of the month 19:30 till 21:30)
Yes(8 out of 10) **Sometimes(6 out of 10)** **Infrequently (4 out of 10)** **No**
- The Unit holds a hill exercise once a month, usually but not always on a Sunday, please indicate how many you think you would be able to attend per year.
1 - 3 **4-6** **7-9** **10-12**

Section 6: Personal Skills

Please rate yourself in the following areas from 0 to 5, with 0 being no experience and 5 being excellent.

Navigation		Summer Walking	
Winter Walking		Rope Work	
Winter Skills		Radio Communications	
First Aid		Fitness	

Do you hold a current first aid certificate? Yes No

If so please give details and renewal date: _____

If you have any other skills relevant to the role of the Unit, please give details below. You should also include a summary of your hill walking / mountaineering experience.

Thank you for taking time to complete the application form. All information given is treated in the strictest confidence and used only to assess your suitability to begin training.

Please return completed form to: The Secretary, Border SAR, 60 Castle Street, NORHAM, TD15 2LQ