



<b>BENNINGTON RESCUE SQUAD</b>	
<b>EMS INTERNSHIP PROGRAM</b>	
Created: February 2018	Revisions: March 2023

## PURPOSE

To provide an opportunity for individuals seeking experience in emergency medical services (EMS).

## INTERN REQUIREMENTS

Bennington Rescue provides three programs for EMS interns.

**All** interns must meet the following requirements:

1. Be a minimum of 16 years of age except as outlined below.
2. No criminal convictions or history that would preclude the applicant from observing or interacting with sensitive patient information or at-risk populations.
3. Proof of Hepatitis B Vaccine or Letter of Declination.
4. Proof of current COVID-19 and seasonal influenza immunizations.

Preferred / recommended:

Obtain or maintain a current CPR card from the American Heart Association or American Red Cross.

**Observer, Student,  
Certified, or  
Administrative Intern**

Internship is for an individual, most often evaluating EMS as a career option, seeking understanding of EMS work, performing student time or work-based learning for a non-Bennington Rescue education program, or an EMS provider interested in experiencing the Bennington Rescue work environment prior to applying for employment.

## INTERNSHIP PROCESS

### 1. APPLICATION:

- a. Potential interns must file an application (see Appendix A) including any required documentation. Submit the application to [admin@brsvt.org](mailto:admin@brsvt.org)
- b. The Administrative Team (Directors) review all internship applicants on a rolling basis.
- c. Approved applicants are subject to background screening.

### 2. ONBOARDING:

- a. Selected applicants are required to undergo confidentiality education.
- b. Interns may be required to have applicable training to their area of internship. For example:
  - i. Clinical observer interns receive bloodborne pathogens and lifting & moving training.
  - ii. Administrative interns receive computer security training.
- c. This training may occur in the classroom, office, or in the field, as determined by Bennington Rescue administration.
- d. Student interns with other affiliated education programs may, or may have their program, provide proof of training. Any external training is subject to the approval of Bennington Rescue administration.

### 3. SCHEDULING:



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- a. Interns are scheduled at the convenience of Bennington Rescue. It is recommended that interns provide multiple days and times of availability.
- b. Interns are scheduled between the hours of 06:00-00:00 (midnight).
  - i. Interns are only allowed on Bennington Rescue premises during those hours.
  - ii. On a case-by-case basis, administration may approve overnight hours for student interns.
- c. Each intern will be assigned to a Bennington Rescue crew member for their shift(s).
- d. If an intern is unable to make a shift, they must notify the on-duty supervisor at 802-379-2911 and send an email message to [supervisor@brsvt.org](mailto:supervisor@brsvt.org) prior to the shift start time.
  - i. Failure to attend a scheduled shift without notice as described will result in dismissal from the internship program.
  - ii. Failure to attend more than one scheduled shift, even with notice, will result in a meeting with a member of the administrative team to determine the intern's status in the program.
- e. If an intern is disruptive, disrespectful, or otherwise negatively impacting the Bennington Rescue work environment, the Bennington Rescue crew member overseeing the intern may choose to send the intern home and immediately notify the on duty EMS Supervising Officer / Captain or administrator on call.

#### 4. APPEARANCE:

- a. Interns must wear appropriate attire for the environment. Examples include: sturdy black shoes, outerwear, business casual for office work, etc.
- b. Clinical student interns must wear their education program's assigned uniform. If no uniform is assigned, the intern must comply with the requirements of this section.
- c. Black, dark blue, or khaki uniform or trouser style pants are acceptable. No jeans, denim, or leggings allowed.
- d. No visible offensive tattoos as deemed by Bennington Rescue Administration. No visible piercings except ears, nose stud, or clear inserts.
- e. Interns must exhibit good personal hygiene (no body odor, no perfumes, or colognes, etc.)

#### 5. PARTICIPATION IN PATIENT CARE:

- a. All patient care is provided by licensed and credentialed Bennington Rescue crew members (EMTs, AEMTs, and paramedics).
- b. As allowed and directed by their assigned Bennington Rescue crew members, clinical interns may participate in care up to their current level of training in their formal education program or VT EMS license. Examples include:
  - i. Clinical observer intern: may help move equipment to / from the scene of a call or participate in cardiopulmonary resuscitation (CPR), if certified.



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- ii. Clinical student intern: may participate in patient interviewing, physical assessment, patient movement, and care they are qualified to provide by their education program.
- c. Interns may be overridden by their assigned crew member at any time.

### 6. SEPARATION:

- a. Bennington Rescue internships last up to a maximum of six months.
  - i. An intern may request an extension of an internship in writing to [admin@brsvt.org](mailto:admin@brsvt.org).
  - ii. An education program may have an existing agreement on file with Bennington Rescue for durations of more than 6 months.
  - iii. Extensions are discretionary and not guaranteed.
- b. Bennington Rescue administration may at any time terminate an internship for any reason.
- c. The position of intern is unpaid and not subject to any benefits.



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**APPENDIX A - APPLICATION (all fields are required)**

Last Name:		First Name:		Middle Initial:
Home Address:				
City:		State:	Zip:	
Phone:			Email:	
Date of Birth:		If under 18, name of Parent/Guardian:		
Emergency Contact:		Parent/Guardian Contact Phone:		
Emergency Contact Phone:		Parent/Guardian Contact Email:		

**TYPE OF INTERNSHIP REQUESTED – SELECT ONLY 1**

- Clinical Observer Intern** – Observing EMS crews at work in the field
- Clinical Student Intern** – EMS student at a non-Bennington Rescue education program  
Education Program Name: \_\_\_\_\_  
Program Director name & email: \_\_\_\_\_  
Clinical Coordinator name & email: \_\_\_\_\_
- Certified Observer Intern - Must submit valid NREMT, BLS CPR, and FEMA IS 5, 100, 200, 700, and 800.**
- Administrative Intern** – Working with our administration or business office crew

Briefly describe the goals of your internship:



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**I certify that I meet the following requirements:**

1. I am either:
  - a. A minimum of 16 years of age for an administrative, observer, or student EMR, EMT intern or
  - b. A minimum of 18 years of age for a student AEMT, paramedic, or certified intern
2. I have no criminal convictions or history that would preclude me from observing or interacting with sensitive patient information or at-risk populations. I understand that Bennington Rescue Squad may request background checks with my consent.
3. I must provide proof of current immunizations as required by Bennington Rescue Squad.
4. For clinical student and certified interns: I must obtain or maintain a current CPR card from the American Heart Association or American Red Cross.
5. I understand that Bennington Rescue internships last up to a maximum of six months.
6. I understand that Bennington Rescue administration may at any time terminate an internship for any reason.
7. I understand that the position of intern is unpaid and not subject to any unemployment or other benefits.
8. **I understand that the EMS environment includes a wide variety of situations which may be dangerous, unsafe, include the exposure to situations that may be disturbing to the senses or emotionally. Due to the unpredictable nature of the environment it may result in returning at a time later than the scheduled end time of the intern experience.**
9. Media Release: I hereby grant the Town of Bennington Rescue Squad permission to use my likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications, without payment or other consideration. I understand and agree that all photos will become the property of the Town of Bennington Rescue Squad and will not be returned. I hereby irrevocably authorize the Town of Bennington Rescue Squad to edit, alter, copy, exhibit, publish, or distribute these photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.
10. Survivability of Privacy Rules: I understand that my internship experience is subject to a confidentiality agreement which remains in effect in perpetuity to safeguard patients' protected health information.
11. Hold Harmless Agreement: I, \_\_\_\_\_, in consideration of permission to ride in the vehicles operated by Town of Bennington Rescue Squad for the purpose of observing emergency medical techniques, which permission I hereby acknowledge as having been granted, do hereby release, acquit, and forever discharge Town of Bennington Rescue Squad, its officers, directors, agents, servants, successors and assignees, and all other persons, firms and corporations of and from any and all actions, causes of action, claims, demands, damages, costs, injuries to person or property, loss of service, expenses and compensation which may hereafter arise on behalf of myself, my heirs, executors, assignees and personal representatives, out of any matter related to the riding in a vehicle of Town of Bennington Rescue Squad for the purpose of observation. I further declare and represent that no promise or agreement not herein expressed has been made to me, and that this release contains the entire agreement between the parties hereto, and that the terms of this release are contractual, and not a mere recital. I further state that I am over eighteen years of age; that I have carefully read the foregoing Release, and know that contents thereof, and that I sign it as my own free act.

**Intern Applicant Signature:**

**Date:**

**Parent/Guardian Signature if under age 18:**

**Date:**