



**SW FLORIDA MEDICAL RESERVE CORPS
VOLUNTEER APPLICATION**

Last Name _____ First Name _____ MI: _____

Prefix/Suffix (circle all that apply): MD,RN,LPN,MPH,PhD,NREMT-P, NRENT-B, Other _____

Mailing Address: _____ City _____ Zip _____

Home Phone(day/evening) _____ Work _____ Cell _____

e-mail address (es): _____

Months available for volunteer activities _____

Emergency Contact: _____ Phone _____ Relationship _____

Retired/Employed: Current Position _____ Employer _____

Disaster Response Experience: no__ yes__ Type: _____

Language Skills: Language _____ Speak _____ Read _____ Write _____
Language _____ Speak _____ Read _____ Write _____

Have you ever been convicted of a felony for something other than a driving offence?
No__ Yes__ Explain: _____

VOLUNTEER STATUS

I am interested in: _____ Clinical Support _____ Non-Clinical Support _____

Profession/ Degree: _____

Fl. License/Certification:

Valid: yes/no Number _____ Type _____ Expiration date _____

Other states: _____

Valid: yes/no Number _____ Type _____ Expiration date _____

AREA(S) of INTEREST

Disasters and public health emergencies

Mental Health

Mass immunization / mass medication clinics/ pandemic activities

Hospital support

Community Outreach and Education Programs

Administrative/ Support Services:

Clerical Assistance Marketing/PR Social & Fundraising Communications: (web, computer, newsletter, hotlines, phone tree, ham operators, translators),

Other:

I hereby authorize the verification of all necessary information, including employment, education, licensure, criminal history, and any other pertinent information related to this volunteer position. I certify that my answers are true and complete and that I have not knowingly withheld any information. I understand that any misrepresentation or omission of facts on this application may be a cause for non- selection of dismissal

Signature: _____ Date: _____

Mail to: Steve Fettner, LCHD, 2295 Victoria Ave., #207, Ft. Myers, FL 33901

FAX: 239-461-6101 VOICE: (239) 461-6109

Lee County Health Department
Section 110.501 Florida Statute Volunteer
State Liability Protection

Medical volunteers, as defined in Section 110.502 Florida Statutes have state liability protection when they volunteer uncompensated services for the Lee County Health Department. The volunteer benefits are set forth in Section 110.504 Florida Statutes. Volunteers are covered by state liability protection in accordance with the provisions of Section 768.28 Florida Statutes. This means that the volunteers have the same insurance coverage as state employees receive as “agents of the state”.

Section 768.28(9) Florida Statutes provides that and “agent of the state” shall not be held personally liable or named as a defendant in any lawsuit for any injury or damage suffered for any act or omission while performing volunteer services, unless that agent acted in bad faith or with malicious purpose or in a manner exhibiting wanton and willful disregard of human rights, safety or property. From a practical stand point what it means is if a Lee County Health Department patient files a lawsuit claiming a volunteer at the Health Department caused an injury in delivering services, the patient may only file the lawsuit against the state, not the individual volunteer. It also means that in any such lawsuit the Department of Insurance will hire and pay for a lawyer to defend the lawsuit. And lastly, it means in the same instance that if the court decides the patient has suffered damage as the result of an act of the volunteer while performing services at the clinic, that patient may only be awarded damages up to \$100,000. Of course any judgment or settlement is paid by the state. This is the patient’s exclusive remedy by statute, which means that a claim against the volunteer’s private malpractice insurance that may be in place for other purposes should not be successful. This statutory granted status could only be challenged in a court of law if the volunteer was not operating under the scope of his or her volunteer duties or found to be acting in bad faith or with malicious purpose or in a manner exhibiting wanton and willful disregard of human rights, safety and property. Volunteers are also covered by the State’s workers compensation plan when they are providing volunteer services.