Observer Program Application

The JeffSTAT program is responsible for transporting critically ill and injured patients throughout the Delaware Valley region. This is a unique opportunity to have a look at the work our program does, how our team interacts and functions, as well as what YOU, the observer, can bring to your community or service as a result of this experience.

Date of Application: _____

Please indicate your interest for shift aboard one of our helicopters or ground ambulances: ☐ **Flight** ☐ **Ground** ☑ **Either**

Preferred Dates: _____

Have you observed with us before: ☐ **Yes** ☑ **No** **If Yes, When?** _____

NAME: _____ , _____ AGE: _____ WEIGHT: _____
(Last) (First) (< 200lbs)

ADDRESS: _____

_____ STATE: _____ ZIP CODE: _____

TELEPHONE: (___) _____ EMAIL ADDRESS: _____

PLEASE LIST AN EMERGENCY CONTACT AND NUMBER:

NAME: _____ PHONE NUMBER: _____

PLEASE DESCRIBE ANY HEALTH ISSUES WHICH MAY AFFECT YOUR ABILITY TO TOLERATE A FLIGHT ENVIRONMENT:

LEVEL OF TRAINING (CHECK ALL THAT APPLY):

☐ FIRST RESPONDER
☐ EMT
☐ PARAMEDIC
☐ RT
☐ RN
☐ NP/PA
☐ MD
☐ MEDICAL STUDENT
☐ PARAMEDIC STUDENT
☐ NURSING STUDENT
☐ OTHER (LIST): _____

HOSPITAL OR SERVICE AFFILIATION: _____

Please briefly tell us how will this experience help you in your current professional career?

How will this experience help the JeffSTAT program?

Thank you for your interest. You will be contacted shortly. If selected for an observation shift, then you will be provided with further information. Observers on the helicopter must weigh 200 lbs or less due to the weight limitations of the aircraft. Persons who exceed this weight may accompany the critical care ground ambulance crews and may inspect the helicopter when it is not committed to a transport. Observation shifts on JeffSTAT aircraft are only allowed between the hours of 0700 and 1900.

JeffSTAT reserves the right to postpone, cancel or revoke observer privileges at any time.

Please fax form to 215-955-9777