Virginia Tech Rescue Squad
Standby Report Form

Form # VT 000060

Incident # _____ Incident in ❒ CITY ❒ COUNTY of: _____

Agency: VTRS (221) Units: _____

Inc. Location: _____

Location Type			
1	Home/Residence	7	Public Building
2	Farm	8	Residential Institution
3	Mine/Quarry	9	Educational Institution
4	Industrial Place/ Premises	10	Other Specified Location
		11	Unspecified Location
5	Recreation Place	NA	Not Applicable
6	Street/Highway	U	Unknown

Type of Service	
4	Standby

Incident Disposition	
NA	Not Applicable

								Date

TIMES (24 Hour Format)

				Responding
				Arrive Scene
				Leave Scene
				Return Service

Level of Care Available	1	ALS	2	BLS

Name of Organization _____

Contact Person _____

VTRS Manhours _____

University Affiliation	
1	Student Org.
2	Department
3	Auxiliary
O	Other:

Attendant in Charge _____ Cert # _____ Signature _____

Other Personnel _____

_____

Law Officers _____

Fire Presonnel _____

Total Number of Patients: _____ Transports: _____ Refusals: _____

Narrative _____