



**Arlington County Public Health
Volunteer Management System**



CREDENTIALS & QUALIFICATION SECTION		
SECTION COMPLETED BY (VMS STAFF):		
ID TYPE	PHOTOCOPY	CONFIRMATION
Personal ID (government issued ID-drivers license, passport)		
Employment ID (healthcare organization or agency affiliation ID)		
Licensure (Professional)		
Certifications (ACLS, EMT card, other)		
Secondary Source (State-accredited healthcare organization)		
> FALSE CREDENTIALS		
Special Skills (include add. sign and foreign languages spoken fluently):		
Availability (days and hours):		Preferred shift: Day • Eve •

* 'privilege' means permission to practice your healthcare profession within that organization