



# FAUQUIER COUNTY FIRE, RESCUE & EMERGENCY MANAGEMENT

TRAINING AND LOGISTICS DIVISION  
210 HOSPITAL DRIVE, SUITE 100  
WARRENTON, VA 20186  
(540) 422-8820



## PRECEPTING AUTHORIZATION FORM

Student Name: \_\_\_\_\_

Affiliation: \_\_\_\_\_

### PRECEPT/INTERN

Precepting:  Interning:  Class Dates: \_\_\_\_\_

### PRECEPT/INTERN LEVEL:

Paramedic:  Intermediate:  Enhanced:

Lead Preceptor: \_\_\_\_\_

### RIDEALONG

- ACTIVE PARTICIPANT:** Preceptee or Intern who is allowed to function under the supervision of a preceptor but, is from an agency outside Fauquier County.
- INACTIVE PARTICIPANT:** A Citizen or VIP who wishes to ride with a Fauquier County Unit for the purposes of observing fire and rescue services.

### Checklist:

- ∇ Ride-along form (if out of County)
- ∇ Class permission to practice form (if interning)
- ∇ ALS certification (if precepting)
- ∇ CPR card

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Training Division Representative

I certify that information listed above is true and complete. I understand that false information may be grounds for termination of precepting/internship. I authorize the verification of any or all information listed above.