The Suffolk Educational program for Retention in the Voluntary Emergency Service ("SERVES")
# Table of Contents

I. Introduction and Definitions .............................................................................................................. 1
II. Disclaimers, Communications and Disclosures ............................................................................... 2
III. Contact Information ....................................................................................................................... 3
IV. Application Requirements .............................................................................................................. 3
V. Application Process .......................................................................................................................... 4
VI. Selection Criteria ............................................................................................................................ 5
VII. Tuition Reimbursement Requirements ......................................................................................... 6
VIII. Service Obligation ......................................................................................................................... 7
IX. Termination from SERVES, Financial Obligation, Deferment and Forbearance ..... 8
X. Monitoring and Fulfillment Obligation ............................................................................................. 11
XI. Notifications .................................................................................................................................... 12
Appendices .............................................................................................................................................. 13
I. Introduction and Definitions

In Suffolk County (the “County”), it is citizen volunteers who respond to many emergency situations. Due to a variety of factors, local volunteer fire departments and volunteer Emergency Medical Services (“EMS”) Agencies are currently experiencing a critical need to recruit and retain members.

As an incentive for students to serve at County volunteer fire departments and EMS agencies, the Suffolk County Department of Fire, Rescue, and Emergency Services (“FRES”), has developed the Suffolk Educational program for Retention in the Volunteer Emergency Services (“SERVES”). This program will provide tuition reimbursement to Student-Volunteers for their volunteer service in the County, for up to one hundred twenty (120) lifetime credit hours. SERVES program credit hours must be obtained from a New York State Education Department approved college or university within Suffolk County (see Appendix A attached to this guide). Any/All Previous Lifetime credits earned at or through any college/university, will count towards the one hundred twenty (120) lifetime credit hour limit. SERVES does not reimburse retroactively for previously earned credits.

In exchange for the fulfillment of established service requirements in a County volunteer fire department, volunteer fire company, or volunteer EMS Agency, SERVES Student-Volunteers (as defined hereinafter) enrolled as full-time or part-time students are eligible for tuition reimbursement based upon a sliding scale of grade point average (“GPA”) specified in Section VII of this guide.

There is no restriction as to the type of academic coursework the SERVES Student-Volunteer chooses to pursue.

As a companion to this guide, SERVES maintains a web page (www.suffolksbravest.com) that provides additional information, frequently asked questions, and all required forms available for download, including this guide.

Definitions

Volunteer Service Commitment Form: the application required for SERVES tuition reimbursement (See Appendix B).

Chairperson: Any person who serves in the highest administrative capacity of an eligible volunteer fire department, volunteer fire company, or volunteer EMS Agency.

Chief: Any person who serves in the highest operations capacity of an eligible volunteer fire department, volunteer fire company, or volunteer EMS Agency.

Committee: Suffolk County Volunteer Recruitment and Retention Committee.

Financial Aid: Funds awarded to a Student-Volunteer for which no repayment is
required (e.g. TAP, Pell, APTS, and etc.). Financial aid excludes work-study, Stafford Loans, subsidized/unsubsidized student loans, and etc.

**Lifetime Credit Hours:** All college/university credit hours obtained during the Student-Volunteer’s lifetime (prior to and including credit earned through SERVES).

**Sponsoring Agency:** A volunteer fire department, volunteer fire company, or volunteer EMS Agency within Suffolk County, which has provided a current FRES Annual Volunteer Census Form and is in compliance with applicable federal, state and local laws. Volunteer fire departments must be participating in the National Fire Incident Reporting System (NFIRS) by submitting current incident data to the New York State Office of Fire Prevention and Control and possessing an account with the New York State Fire Reporting System.

**Student-Volunteer:** An individual member of a volunteer fire department, volunteer fire company, or a volunteer EMS Agency within Suffolk County, approved to receive tuition reimbursement for up to one hundred twenty (120) lifetime credit hours. While enrolled in the SERVES program, credit hours must be obtained from a New York State Education Department approved college or university within Suffolk County (see Appendix A).

**Volunteer EMS Provider Agency:** Any eligible Suffolk County volunteer EMS Agency.

**Volunteer Fire Department:** Any eligible Suffolk County volunteer fire department or volunteer fire company.

### II. Disclaimers, Communications and Disclosures

1. Acceptance as a member of a local volunteer fire department, volunteer fire company, or volunteer EMS agency and acceptance for enrollment at a college or university does not guarantee the Student-Volunteer will be awarded tuition reimbursement under SERVES.

2. SERVES Student-Volunteers may be subject to discontinued financial assistance at any time due to limitations of SERVES funding.

3. SERVES reserves the right to discontinue funding for cause and the Student-Volunteer will be notified, in writing, at least thirty (30) days prior to the start of the next semester.

4. The Suffolk County Attorney’s Office shall handle all collections for tuition reimbursement repayment if educational and/or service obligations are not met.

5. Service obligations are required regardless of degree attainment.
6. No provision for termination appeal, grace periods, or reinstatement exists under this guide.

7. This guide and forms are subject to revision.

8. The most current version of this guide and forms are available on www.suffolkbravest.com

9. In the event of deficiencies not addressed by this guide, FRES and SERVES administrative personnel shall make and interpret policy, and issue a decision(s) in accordance with the intent of the program. Such decisions shall be final and binding.

10. Any and all communications and disclosures regarding a Student-Volunteer’s participation in SERVES shall be limited to the Student-Volunteer unless the Student-Volunteer has designated an authorized representative to act on his or her behalf (see Appendix D).

III. Contact Information

Please send all questions and submissions to the following:

Suffolk County Department of Fire, Rescue & Emergency Services
SERVES
102 East Avenue
Yaphank, New York 11980
Attn: Sari Goldhaber
Phone: (631) 852-4907
Fax: (631) 852-4922
E-mail: SERVES@suffolkcountyny.gov or sari.goldhaber@suffolkcountyny.gov

IV. Application Requirements

A. Requirements to apply for the SERVES program are as follows:

1. The Student-Volunteer shall be an active member in good standing, of an eligible Suffolk County Sponsoring Agency prior to making application.

2. The Student-Volunteer must be enrolled in a New York State Education Department approved college or university within Suffolk County (see Appendix A).

3. The Student-Volunteer’s eligibility for the SERVES program includes consideration of all previously earned credits through any college/university.
These credits will count towards the one hundred twenty (120) lifetime credit limit. SERVES does not reimburse retroactively for previously earned credit. Post graduate studies are not eligible for tuition reimbursement under SERVES.

4. SERVES funds can only be utilized for on-campus (classroom) and distance (Internet) learning tuition costs, and cannot be applied to books or other school fees. The Student-Volunteer agrees to use SERVES funds only to supplement any tuition not covered by other sources of free financial aid or only after other such resources are exhausted.

5. The Student-Volunteer shall commit to providing the applicable service to their Sponsoring Agency throughout their participation in the SERVES Program, for which any reimbursement is received, in accordance with the schedule specified in Section VIII of this guide.

6. The Student-Volunteer shall report their service commitment utilizing the Sponsoring Agency Tracking Form, which requires certification by the Chief/Chairperson of their Sponsoring Agency, until the completion of their service obligation.

V. Application Process

Step 1 Volunteer Service Commitment Form

i. Complete a Volunteer Service Commitment Form (the “Application”) that must be notarized. This form is available on-line at www.suffolksbravest.com and is attached to this guide (see Appendix B).

ii. You must apply separately for each semester that you wish to be considered for SERVES funding, regardless if you were previously accepted.

iii. The Application must be submitted no later than October 1st for the fall semester and February 1st for the spring semester.

iv. The Application must be mailed to SERVES to the address specified in Section III of this guide. Applications will not be accepted via email or fax.

Applicants will receive notification of receipt of their Application via e-mail within ten (10) days of receipt of the form.

Step 2 Supporting Documentation

The following supporting documentation must be provided to complete the Application:
i. A copy of the Student-Volunteer’s official college/university bill, indicating the Student-Volunteer’s tuition charge and any/all non-SERVES financial aid.

ii. Full and Part-time students MUST complete the following:

iii. Full-time and Part-time students must file a Free Application for Federal Student Aid (FAFSA) and provide proof of filing.

iv. Full-time students must file a free application to the NYS Higher Education Service Corporation (HESC) Tuition Assistance Program (TAP) and provide proof of filing.

v. Part-time students must submit an application for Aid for Part Time Study (APTS) made through your college financial aid office.

vi. The above supporting documentation must be submitted no later than November 1st for the fall semester and March 1st for the spring semester.

vii. Supporting documents may be e-mailed to SERVES.

viii. After the November 1st and March 1st deadlines respectively, and upon the receipt of all required supporting documentation, the Committee shall review the entire application package; verifying tuition costs and sources of financial aid. All applicants will be sent an e-mail notification indicating the status of their Application approximately 4-6 weeks after the deadline.

VI. Selection Criteria

Criteria governing the selection of Student-Volunteers for the SERVES program are as follows:

1. Applications shall be date stamped upon receipt and the earliest dated applications shall be reviewed first, as SERVES funds shall be disbursed on a first come, first served basis.

2. SERVES also provides for the Committee to grant SERVES tuition reimbursement as a recruiting incentive, in those circumstances where an extraordinary need or concern for public safety is deemed necessary by FRES.

The requirements for the Committee to provide extraordinary tuition reimbursement under SERVES are as follows:

i. A clear and obvious need to increase volunteer enrollment by the local volunteer fire department, volunteer fire company, or EMS Agency.
ii. This need must be demonstrated in a letter, submitted by the
Chairperson/Chief of the local volunteer fire department, volunteer fire
company, or volunteer EMS Agency, to FRES.

iii. Verification of the membership needs of the local volunteer fire department,
volunteer fire company, or volunteer EMS provider agency will be made by
FRES, who will make a recommendation to the Committee for review.

iv. The Committee shall review the recommendation and may forward the
recommendation to the FRES Commissioner for a decision.

VII. Tuition Reimbursement Requirements

Step 1

At the completion of each qualifying semester, the Student-Volunteer shall provide
the Committee with the following documents within ten (10) business days of the
conclusion of each semester:

i. Student-volunteer’s transcript, including GPA of their most recently completed
semester (an electronic copy is acceptable). The transcript must include the
following:

   a. The Student-Volunteer's name.

   b. At least one (1) other personal identifier (i.e., Student ID #, Date of
      birth or Soc. Sec. #).

   c. The total number of credits attempted and/or achieved.

   d. The completed semester’s GPA along with a cumulative GPA.

ii. An original Sponsoring Agency Tracking Form, signed by the
Chief/Chairperson of their Sponsoring Agency must be mailed back to
SERVES to the address specified in Section III of this guide. This form will be
mailed to you prior to the end of the semester.

iii. A completed W-9 Form (see appendix C of this guide or it can be downloaded
mailed back to SERVES to the addressed specified in Section III of this guide.

iv. Upon receiving all documentation listed in this step, FRES will calculate the
amount of reimbursement earned and will mail to you the SERVES Grant
Default Agreement and a Suffolk County Payment Voucher. SERVES tuition
reimbursement rates are based upon the Student-Volunteer’s GPA for each
semester completed as follows:

   3.75 – 4.00 or an “A” = 100% tuition reimbursement
3.00–3.74 or a “B” = 75% tuition reimbursement
2.00–2.99 or a “C” = 50% tuition reimbursement
Less than 2.0 = No tuition reimbursement

NOTE:

SERVES reimbursement shall not exceed the current value of full-time, Suffolk County resident tuition at Suffolk County Community College for the semester applied for reimbursement. (Visit https://www.sunysuffolk.edu/Prospects/Tuition.asp for current tuition costs).

SERVES reimbursement shall not exceed the current value of part-time (less than twelve (12) credits), Suffolk County resident tuition at Suffolk County Community College for the semester applied for reimbursement. (Visit https://www.sunysuffolk.edu/Prospects/Tuition.asp for current tuition costs).

Step 2
The Student-Volunteer’s completed Grant Default Agreement (signed and notarized) and the signed Suffolk County Payment Voucher must be mailed back to SERVES to the address specified in paragraph III of this guide within ten (10) business days of the date of the Grant Default Agreement letter for reimbursement.

VIII. Service Obligation

At the core of SERVES is an individual’s commitment to meet the needs of his/her community. Student-Volunteers must maintain acceptable volunteer activity and training levels as set forth by their Sponsoring Agency during their entire course of study. The meeting of these objectives will be verified by their Sponsoring Agency utilizing the Sponsoring Agency Tracking Form. This service obligation begins, upon being accepted into SERVES, and continues until the service obligation is satisfied as specified below:

NOTE: Any twelve (12) month break from attendance at a college/university will count towards repayment of a student-volunteer’s service obligation.

NOTE: Service obligations are required regardless of degree attainment.

Service Obligation After the Attendance at a College/University

| Eighty-one (81) to One Hundred Twenty (120) credits | Five (5) years following the receipt of total SERVES funds. |
Sixty-one (61) to eighty (80) credits | Four (4) years following the receipt of total SERVES funds.
---|---
Forty-one (41) to sixty (60) credits | Three (3) years following the receipt of total SERVES funds.
Twenty-one (21) to forty (40) credits | Two (2) years following the receipt of total SERVES funds.
One (1) to twenty (20) credits | One (1) years following the receipt of total SERVES funds.

**IX. Termination from SERVES, Financial Obligation, Deferment and Forbearance**

1. A Student-Volunteer may be immediately terminated from SERVES, without possible future reinstatement for the following reasons:

   a. Failure to meet acceptable volunteer activity levels as determined by their Sponsoring Agency;

   b. Abandoning or otherwise forfeiting membership in their Sponsoring Agency;

   c. Termination or expulsion from membership from their Sponsoring Agency.

2. If a SERVES Student-Volunteer is terminated from SERVES due to any of the conditions listed above, they must reimburse to SERVES, all tuition reimbursement funds received, on a prorated basis, within ninety (90) days of receiving notice, for failure to complete the remainder of their service obligation as follows:

<table>
<thead>
<tr>
<th>TERMINATION DATE</th>
<th>REIMBURSEMENT TO SERVES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Within one year following the receipt of total SERVES funds.</td>
<td>Full reimbursement of all tuition reimbursement funds received for all semesters attended to date.</td>
</tr>
<tr>
<td>One year following the receipt of total SERVES funds but less than two years after receipt of total SERVES funds.</td>
<td>Reimbursement of 4/5 of all tuition reimbursement funds received for all semesters attended to date.</td>
</tr>
<tr>
<td>Two years following the receipt of total SERVES funds but less than three years after receipt of total SERVES funds.</td>
<td>Reimbursement of 3/5 of all tuition reimbursement funds received for all semesters attended to date.</td>
</tr>
<tr>
<td>Three years following the receipt of total SERVES funds but less than four years after receipt of total SERVES funds.</td>
<td>Reimbursement of 2/5 of all tuition reimbursement funds received for all semesters attended to date.</td>
</tr>
<tr>
<td>Four years following the receipt of total SERVES funds but less than five years after the receipt of total SERVES funds.</td>
<td>Reimbursement of 1/5 of all tuition reimbursement funds received for all semesters attended to date.</td>
</tr>
</tbody>
</table>
3. A Student-Volunteer that requires a payment plan for the repayment of SERVES funds, shall be permitted to make payments in accordance with the following:

<table>
<thead>
<tr>
<th>SERVES REIMBURSED CREDITS</th>
<th>REPAYMENT PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sixty-one (61) to One Hundred twenty (120) credits</td>
<td>Equal monthly payments over Three (3) years of all tuition reimbursement funds received under SERVES.</td>
</tr>
<tr>
<td>Twenty-one (21) to sixty (60) credits</td>
<td>Equal monthly payments over Two (2) years of all tuition reimbursement funds received under SERVES.</td>
</tr>
<tr>
<td>One (1) to twenty (20) credits</td>
<td>Equal monthly payments over One (1) year of all tuition reimbursements under SERVES.</td>
</tr>
</tbody>
</table>

3. A Student-Volunteer may apply for a deferment based on the following:

a. Deferment for Exceptional Circumstances:

   Under exceptional circumstances and with good cause provided in writing by the Student-Volunteer, the Committee and FRES may grant approval for a one (1) time deferment for a maximum period of one (1) semester. During this period, the Student-Volunteer must continue to meet all Sponsoring Agency responsibilities, and submit documentation through the Sponsoring Agency Tracking Form for that semester.

b. Deferment for Post Graduate Studies:

   A Student-Volunteer may, for one (1) time only, be permitted to defer their service requirements for post graduate studies, if they attend an accredited college or university outside of the County. Student-Volunteer must maintain their status as an active member in good standing of their Sponsoring Agency throughout the period of their deferment, and submit annual documentation through their Sponsoring Agency Tracking Form.

   Such a request must be submitted in writing to SERVES prior to beginning their post graduate studies. If approved, the SERVES Student-Volunteer must provide a copy of their schedule and transcript for each semester.

   This deferment of service would be on a one (1) time only basis, be continuous and conclude within three (3) years of the date of approval. This approved deferment shall not add or reduce the Student-Volunteer’s service obligation.

   Failure to adhere to these conditions will result in the immediate restoration of the Student-Volunteer’s service obligation requirements and/or the repayment of any outstanding balance due to SERVES.

   Note: A Post Graduate Student-Volunteer can choose to remain an active member and begin the service obligation period immediately in accordance with the provisions contained in this guide.
4. **Deferment for Armed Forces Enlistment:**

A SERVES Student-Volunteer that enlists in the Armed Forces of the United States after enrollment at an approved college/university will be permitted to defer service requirements during any period of ACTIVE DUTY.

Such a request must be submitted in writing to SERVES within 15 days of the signing of an enlistment contract with a copy of their Department of Defense Form 4 (the “DD-4” form).

Upon approval of the service obligation deferment, the Student-Volunteer must provide a copy of their Leave and Earnings Statement (“LES”) annually (every June) to verify continuous active duty status.

Such a deferment would be continuous and would conclude upon change of status to inactive duty or separation from the Armed Forces.

This will not increase nor reduce the Student-Volunteer’s service obligation. However, if the Student-Volunteer’s continuous active duty time in the Armed Forces equals TWICE their required service commitment time to their Sponsoring Agency, their SERVES service commitment will be considered fulfilled.

Failure to comply with the aforementioned will result in the immediate restoration of all service obligation requirements or the repayment of any outstanding balance due to SERVES.

**Note:** An enlisted Student-Volunteer can choose to remain an active member and begin the service obligation period at any point while on extended leave or inactive status from the Armed Forces in accordance with the provisions contained in this guide.

5. **Forbearance:**
   
a. **Permanent Disability**

   Should a Student-Volunteer apply for permanent disability status either during the enrollment or post-enrollment period of program participation, the Student-Volunteer must provide the Committee via certified or overnight mail a copy of the completed New York State Office of Temporary and Disability Assistance (NYS OTDA) application and supporting documentation.

   Upon receipt of this documentation, the Committee may choose to grant a six (6) month deferment pending a final decision by the NYS OTDA.

   If a permanent disability is determined, all current service requirements or
outstanding balances due to SERVES shall be waived. It shall be the responsibility of the Student-Volunteer, within twenty (20) days of the receipt of the final decision to serve upon FRES, via certified mail a copy of the NYS OTDA final decision.

Failure to provide a copy of the final NYS OTDA decision within twenty (20) days of the receipt of the decision may, absent good cause, result in a denial of forbearance.

b. Exceptional Circumstances

Under exceptional circumstances, and with good cause shown, the Committee and FRES may request the approval of the Commissioner of a waiver of partial or full reimbursement of all SERVES tuition funds received to date due to an unforeseen and unusual circumstance. Requirements for an application for a waiver of reimbursement must include the following:

i. An extraordinary circumstance that is demonstrated in a letter to the Committee and the designated FRES staff to be submitted by the Student-Volunteer and/or their parent/guardian;

ii. This extraordinary circumstance must be supported in a letter to the Committee and the designated FRES staff, to be submitted by the Chief/Chairperson of the Student-Volunteer’s Sponsoring Agency;

iii. FRES shall review this circumstance and a recommendation shall be made to the Committee who may make a recommendation to the Commissioner for a decision.

X. Monitoring and Fulfillment of Obligation

1. Monitoring:

The Student-Volunteer’s Chief/Chairperson shall monitor the Student-Volunteer’s volunteer service progress on a semester-by-semester (non-cumulative) basis until the conclusion of the Student-Volunteer’s service obligation. The Student-Volunteer’s membership shall be verified annually, through the Sponsoring Agency Tracking Form. The Committee will act as the clearinghouse for all inquiries and documentation regarding SERVES and its participants, and will monitor the Student-Volunteer’s educational and volunteer service progress on a semester-by-semester (non-cumulative) basis throughout their entire participation in SERVES.

2. Fulfillment of Obligation:

At the end of a Student-Volunteer’s participation in the SERVES program,
SERVES will issue a letter of confirmation to the student and their Sponsoring Agency upon receipt of all appropriate documentation indicating that all academic and volunteer service obligations have been met.

All applicable local, state or federal laws and regulations shall supersede the procedures and conditions outlined in this guide. The procedures and conditions contained in this guide are subject to change without notice.

**XI. Notifications**

A) Within ten (10) business days following the conclusion of a Student-Volunteer's attendance at a college/university, the Student-Volunteer must complete an updated Sponsoring Agency Tracking Form notifying SERVES and their Sponsoring Agency.

B) The Chief/Chairperson must forward an updated Sponsoring Agency Tracking Form to SERVES if their Student-Volunteer is terminated from their Sponsoring Agency, indicating the change in status.

C) Student-Volunteers may terminate their membership with Sponsoring Agency and become a member of another Sponsoring Agency for the purpose of satisfying their service obligation.

A grace period of ninety (90) days will be allowed between the termination of one membership and the start of another membership. The Student-Volunteer must notify SERVES, in writing, of any change in their Sponsoring Agency.
Appendices

Appendix A

New York State Education Department Approved Colleges/Universities in Suffolk County: This list is to provide prospective applicants with a list of approved institutions of higher education.

Appendix B

Volunteer Service Commitment Form: Each SERVES candidate and his/her sponsoring fire department Board of Commissioners, Chairperson or Company President shall complete this form together. This form addresses the service and financial obligations of all parties to the agreement.

Appendix C

Federal Form W-9: This form shall be submitted at the completion of each qualifying semester to receive reimbursement.

Appendix D

Authorization to Release Personal Information: This form must be completed if you are eighteen years old or older, and would like us to speak with your parent or guardian.
APPENDIX A - New York State Education Department
Approved Colleges/Universities in Suffolk County

Adelphi University - Hauppauge
55 Kennedy Drive
Hauppauge, NY 11788

Adelphi University - Sayville
30 Green Street
Sayville, NY 11782

Empire State College
250 Veterans Memorial Highway #1A11
Hauppauge, NY 11788

Empire State College
303 Griffing Avenue
Riverhead, NY 11901

Farmingdale State College - SUNY
2350 Broad Hollow Road
Farmingdale, NY 11735-1021

Five Towns College
305 North Service Road
Dix Hills, NY 11746

Island Drafting and Technical Institute
128 Broadway
Amityville, NY 11701

LIU Brentwood
1001 Crooked Hill Road
Brentwood, NY 11717

LIU Riverhead
121 Speonk-Riverhead Road
Riverhead, NY 11901-3499

Long Island Business Institute
6500 Jericho Turnpike
Commack, NY 11725

New York Institute of Technology – Islip
300 Carleton Avenue
Central Islip, NY 11722

Suffolk County Community College –
Ammerman Campus
Selden, NY 11784

Suffolk County Community College –
Eastern Campus
Riverhead, NY 11901

Suffolk County Community College –
Michael J. Grant Campus
Brentwood, NY 11717-1092

SUNY Stony Brook - Main Campus
Nichols Road
Stony Brook, NY 11794

SUNY Stony Brook - Southampton
39 Tuckahoe Road
Southampton, NY 11968

St. Joseph’s College
155 West Roe Boulevard
Patchogue, NY 11772

Southampton College of Long Island
University
239 Montauk Highway
Southampton, NY 11968-4198

Touro College at Bay Shore
1700 Union Boulevard
Bay Shore, NY11706

Touro College at Huntington
300 Nassau Road
Huntington, NY 11743
<table>
<thead>
<tr>
<th><strong>APPENDIX B – Volunteer Service Commitment Form</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Student-Volunteer's (S-V) Name:</strong> Mr./Ms./Mrs.</td>
</tr>
<tr>
<td><strong>S-V SS #</strong></td>
</tr>
<tr>
<td><strong>S-V Date of Birth</strong></td>
</tr>
<tr>
<td><strong>S-V Mailing Address</strong></td>
</tr>
<tr>
<td><strong>S-V Residential Address</strong></td>
</tr>
<tr>
<td><strong>S-V Home Phone #</strong></td>
</tr>
<tr>
<td><strong>S-V Cell Phone #</strong></td>
</tr>
<tr>
<td><strong>S-V Email Address</strong></td>
</tr>
<tr>
<td><strong>S-V Total Number of Lifetime Credits Previously Earned</strong></td>
</tr>
<tr>
<td><strong>College(s)/University(s) where Lifetime Credits were Previously Earned</strong></td>
</tr>
<tr>
<td><strong>College/University where the S-V is Currently Enrolled</strong></td>
</tr>
<tr>
<td><strong>S-V College/University Student ID#</strong></td>
</tr>
<tr>
<td><strong>S-V Current Course of Study</strong></td>
</tr>
<tr>
<td><strong>Number of Credits Currently Attempting</strong></td>
</tr>
<tr>
<td><strong>S-V Status</strong></td>
</tr>
<tr>
<td><strong>Name of S-V Sponsoring Agency</strong></td>
</tr>
<tr>
<td><strong>Mailing Address of S-V Sponsoring Agency</strong></td>
</tr>
<tr>
<td><strong>Phone # of S-V Sponsoring Agency</strong></td>
</tr>
<tr>
<td><strong>Fax # of S-V Sponsoring Agency</strong></td>
</tr>
<tr>
<td><strong>S-V Date of Membership in their Sponsoring Agency</strong></td>
</tr>
<tr>
<td><strong>Chief's Email Address</strong></td>
</tr>
</tbody>
</table>
APPENDIX B – Volunteer Service Commitment Form

If accepted into the SERVES Program, I agree to the following:

- I agree to apply for all available sources of financial aid and will use SERVES funds only to supplement any costs not covered by other sources of free financial aid, and only after other such resources have been exhausted; and

- I acknowledge that I will be required to reimburse SERVES for any and all funds received under SERVES in the event that I do not fulfill my volunteer service commitment; and

- As a SERVES student-volunteer, I agree to fulfill a service obligation as outlined in the SERVES Administrative Guide according to the number of credits taken at a college/university, and the total amount of SERVES funds received throughout my participation in the program; and

- I fully acknowledge and agree to fulfill my volunteer fire department’s or volunteer EMS provider agency’s activity and training requirements prior to, during, and following my course of study through the end of my service obligation; and

- In conjunction with my volunteer fire department or volunteer EMS provider agency, I will establish a plan for achieving success under SERVES by balancing my commitments.

- I will fulfill my duties to my volunteer fire department or volunteer EMS provider agency as outlined in my job description, and when unable to perform my required duties I will notify my immediate supervisor as soon as possible.

- I authorize my college/university to release my financial aid history (specifically, the US Dept. of Education’s National Student Loan Data System), academic records and financial aid status to SERVES while I am subject to the conditions of the SERVES Program.
APPENDIX B – Volunteer Service Commitment Form

I declare that all information submitted to SERVES is true and accurate.

______________________________, being duly sworn, deposes and says:

(Print Name of Student-Volunteer)

I am the member of ______________________________________________________________________

(Name of Sponsoring Agency)

I certify that I have complied, in good faith, with the requirements of the Suffolk Educational program for Retention in the Volunteer Emergency Services (SERVES) as contained in the SERVES Guide. I authorize SERVES to make any and all inquiries to the college or university which I attend, and my Sponsoring Agency on my behalf, concerning my past, present and future status. I further certify that I am not receiving, nor have requested, reimbursement for tuition expenses from any other SAFER grant funded programs for the courses covered by SERVES. I also understand that violation of this provision will result in immediate termination in the SERVES and the repayment of all reimbursements received from it.

__________________________________________
(Signature of Student-Volunteer (or Parent if under 18))

Date

Sworn to before me this ________ day of ________________, 20_________

(Notary Public)

__________________________________________
(Printed Name) (Title: Chairman, President, Chief)

of the _____________________________________________________________________________
(Printed Name of the Sponsoring Agency)

due hereby affirm and acknowledge that _____________________________________________________________________________
(Name of Student-Volunteer)

is a member in good standing within this volunteer agency. I acknowledge that this agency will play an active role in meeting the total needs of the student-volunteer. Further, this agency will provide the Suffolk Educational program for Retention in the Volunteer Emergency Services (SERVES) with all requested items as listed in the SERVES Guide, the SERVES Recruitment and Retention Plan and items related to volunteer reporting contained in the Staffing for Adequate Fire and Emergency Response (SAFER) Plan, including but not limited to the submission of current NFIRS reporting data to the New York State Office of Fire Prevention and Control (where applicable).

__________________________________________
(Signature of Representative Indicated Above) Date

Sworn to and before me on this ___________________ day of ____________________, 20_________

(Notary Public)
# Appendix C

## W-9

### Request for Taxpayer Identification Number and Certification

<table>
<thead>
<tr>
<th>Form W-9 (Rev. 12-2014)</th>
<th>Department of the Treasury Internal Revenue Service</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name</strong> (as shown on your income tax return). Name is required on this line; do not leave this line blank.</td>
<td></td>
</tr>
<tr>
<td><strong>Business name/described entity name, if different from above</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Check appropriate box for federal tax classification; check only one of the following seven boxes:</strong></td>
<td></td>
</tr>
<tr>
<td>☐ Individual sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate</td>
<td></td>
</tr>
<tr>
<td>☐ Limited liability company, enter the tax classification (L-C corporation, S-S corporation, P-partnership)</td>
<td></td>
</tr>
<tr>
<td><strong>Note:</strong> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.</td>
<td></td>
</tr>
<tr>
<td><strong>Other (see instructions)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Address (number, street, and apt. or suite no.)</strong></td>
<td>Requester’s name and address (optional)</td>
</tr>
<tr>
<td><strong>City, state, and ZIP code</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 9. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.

**Note:** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/f9.

### Purpose of Form

An individual or entity (Form W-9 requested) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1098-S (proceeds from real estate transactions)
- Form 1098-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued);
2. Certify that you are not subject to backup withholding;
3. Claim exemption from backup withholding if you are a U.S. exempt payer, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 9 for further information.

Cat. No. 10231X   Form W-9 (Rev. 12-2014)
Appendix C

Form W-9 (Rev. 12-2014)

Note: If you are a U.S. person and a requestor gives you a form other than Form W-9 to request your TIN, you must use the requestor’s form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:
• An individual who is a U.S. citizen or U.S. resident alien;
• A partnership, corporation, company, or association created or organized in the United States;
• A branch or permanent establishment of a foreign entity in the United States;
• An estate (other than a foreign estate); or
• A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners’ share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person under the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:
• In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
• In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally the U.S. grantor or other U.S. owner of the grantor trust and not the beneficiaries of the trust;
• In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust;
• In the case of a foreign person, use Form W-8 instead of Form W-9;
• In the case of a nonresident alien individual, use the appropriate Publication Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident aliens who become a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a “saving clause.” Exceptions specified in the saving clause may permit an exemption from tax to continue in effect for certain types of income even after the payer has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if he or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 20, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requestor the appropriate completed Form W-8 or Form 8733.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called “backup withholding.” Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment cards and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requestor your correct TIN, make the proper certifications, and report all your taxable income on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requestor;
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details);
3. The IRS tells the requestor that you furnished an incorrect TIN;
4. The IRS tells you that you are subject to backup withholding because you did not report all interest and dividends on your tax return for reportable interest and dividends only;
5. You do not certify to the requestor that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only);
6. Certain payees and payments are exempt from backup withholding. See Exempt payee code on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see Special rules for partnerships above.

What is FATCA reporting?
The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See Exemption from FATCA reporting on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Updating Your Information
You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties
Failure to furnish TIN. If you fail to furnish your correct TIN to a requestor, you are subject to a penalty of $50 for each such failure unless your failure is due to reasonable cause and not willful neglect.

Criminal penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a $500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fine and/or imprisonment.

Misuse of TINs. If the requestor discloses or uses TINs in violation of federal law, the requestor may be subject to civil and criminal penalties.

Specific Instructions

Line 1
You must enter one of the following on this line; do not leave this line blank. The name must match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose name you entered in Part I of Form W-9.

a. Individual. Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-8, if applicable, and your ITIN. If the name on the form is the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. Sole proprietor or single-member LLC. Enter your individual name as shown on your 1040/1040A/1040EZ or Schedule C or E;

c. Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation. Enter the entity’s name as shown on the entity’s tax return on line 1 and any business, trade, or DBA name on line 2.

d. Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the chart or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

Line 2

a. Disregarded entity. For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(b)(2)(i). Enter the owner’s name on line 1. The name of the owner entered on line 1 should never be a disregarded entity. Enter the owner’s name on line 1 if the disregarded owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity’s name on line 2. "Business name identified entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.
Appendix C

Line 2
If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3
Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC).
If the name on line 1 is an LLC, the person may be a single-member LLC (SMLLC) as defined in section 7101(d)(1). If it is a single-member LLC, enter "S" on the space provided.

Exemption from FATCA reporting code.
The following codes identify payers that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank.

C—An organization exempt from tax under section 501(c)(7) or (8), or individual retirement plan as defined in section 7101(d)(17).

D—The United States or any of its agencies or instrumentalities.

E—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities.

F—A corporation that is a member of the same affiliated group as a corporation described in section 1(b)(3).

G—A dealer in securities, commodities, or derivative financial instruments having no institutional client contracts (including notional principal contracts, forwards, futures, and options) that is registered as such under the laws of the United States or any state.

H—A real estate investment trust.

I—A regulated investment company as defined in section 851 or any regulated investment company at all times during the tax year under the Investment Company Act of 1940.

J—A common trust fund as defined in section 584(a).

K—A bank as defined in section 581.

L—A trust exempt from tax under section 501(c)(14) as described in section 4947(a)(1).

M—A tax exempt trust under section 403(b) plan or section 501(c)(3) plan.

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5
Enter your address (number, street, and apartment or suite number). This is where the requestor of the Form W-9 will mail your information return.

Line 6
Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)
Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, you are a U.S. resident individual taxpayer identification number (ITIN). Enter it in the social security number box, if you do not have an ITIN, see How to get a TIN below.

If you are a sole proprietor and you have an EIN, your employer may enter either the SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the door to the box for the owner’s SSN or EIN, if the owner has one. Do not enter the disregarded entity’s EIN. If the LLC is classified as an organization or partnership, enter the entity’s EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card from your local SSA office or get the form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Form W-7 and SS-4 from the IRS by calling IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write “Applied For” in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, certain payments made with respect to life insurance, generally you will have 90 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 90-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering “Applied For” means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-9.
Appendix C

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-8. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Joint payees, see instruction payer code earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and broker exchange accounts opened before 1984 and broker accounts considered active during 1983. You must sign your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and broker exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requesting, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 on the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified by the IRS that you have previously given an incorrect TIN. “Other payments” include payments made in the course of the requester’s trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account: Give name and SSN of:

1. Individual
   - The Individual
   - The actual owner of the account or, if combined funds, the first individual on the account
   - The minor

2. Two or more individuals (joint account)
   - The joint account holder
   - The actual owner(s)
   - The minor

3. Custodial account of a minor (Uniform Gifts to Minors Act)
   - The grantor
   - The actual owner of the account

4. a. The revocable trust account
   - The grantor
   - The owner

   b. So-called trust account that is not a legal or valid trust under state law
   - The grantor

5. Sole proprietorship or disregarded entity owned by an individual
   - The owner
   - The grantor

6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(ii) (A))
   - The owner
   - The corporation
   - The partnership
   - The trust

7. Disregarded entity not owned by an individual
   - The owner
   - The corporation
   - The organization

8. A valid trust, estate, or pension trust
   - The trust

9. Corporation of LLC electing corporate status under Form 8832 or Form 2553
   - The corporation

10. Association, club, religious, charitable, educational, or other tax-exempt organization

11. Partnership or multi-member LLC

12. A broker or registered nominee

13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or person) that receives agricultural program payments

14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(ii) (A))

15. Corporation

16. Other

17. A trust

18. A legal entity

19. A partnership

20. A corporation

21. A trust

*List first and cite the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person’s number must be furnished.

*Cite the minor’s name and furnish the minor’s SSN.

Securing Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity theft may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN.
- Seal your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-877-777-4778 or to TTY/TELC at 1-866-850-8995.

For more information, see Publication 4550, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for the Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or 1-877-777-4779.

Protect yourself from suspicious emails or phishing scams. Phishing is the creation and use of email or websites designed to mimic legitimate business emails or websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into submitting private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via email. Also, the IRS does not request personal identification information through email or ask taxpayers for the PIN numbers, passwords, or similar access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property through the Federal Trade Commission (FTC) at 1-888-377-7797 or the Federal Trade Commission at 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you: mortgage interest you pay; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA. Archer MSA, or HSA. The person collecting the TIN is required to file to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN within 30 days or you are required to file a tax return. Under section 3408, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.
SERVES Authorization to Release Personal Information

If you are eighteen years old or older, and would like us to speak with your parent or guardian, you will must complete and return the authorization form set forth below. If you are under the age of 18, we will speak to a parent or legal guardian.

I, ______________________________________, reside at the following address:

Please print your name ________________________________

My date of birth is ____________________________, and I consent to the release of any and all records in the possession of SERVES, which are in any way related to me.

SERVES is authorized to release and make full disclosure of such records to, and to discuss any information relating to those records with, the following individual(s):

(Name and relationship of individual to whom SERVES is authorized to release information)

(Name and relationship of individual to whom SERVES is authorized to release information)

This authorization is effective immediately and will remain in effect until revoked by me in writing.

I hereby release and hold harmless SERVES and its agents from any and all claims and actions based upon, arising out of, or relation in any way to any disclosure of records or information pursuant to this Authorization to Release Personal Information.

A copy of this original document shall serve as the original.

Student-Volunteer Signature: ___________________________ Date: ______________

If the above named student-volunteer is under the age of 18, the parent or legal guardian of the student-volunteer must also sign below indication consent and agreement to this Authorization to Release Personal Information.

Parent or Legal Guardian Signature: ___________________________ Date: ______________

Parent or Legal Guardian Cell Phone: ___________________________ Soc. Sec. #: xxx-xx-____________

Parent or Legal Guardian e-mail: ____________________________________________

Parent or Legal Guardian Signature: ___________________________ Date: ______________

Parent or Legal Guardian Cell Phone: ___________________________ Soc. Sec. #: xxx-xx-____________

Parent or Legal Guardian e-mail: ____________________________________________

Please complete and send to: SERVES
102 East Avenue
Yaphank, NY 11980
Attention: Sari Goldhaber