

Disaster Service Worker Volunteer Program (DSWVP): Claims' Information and Instruction for Employers

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Claim Submission

If a DSW volunteer is injured as a result of an authorized deployment or a pre-approved training, please follow the procedures below:

1. Provide **SCIF 3301**, Employee's Claim to injured DSW volunteer within 24 hours of knowledge of injury.
 - a. DSW volunteer completes 1-8 (top section) and returns to employer.
 - b. Employer provides copy to DSW volunteer and then completes 9-18 (bottom section).
 - c. Completed form must be submitted within 1 working day after receipt from DSW volunteer.
2. Complete **SCIF 3267**, Employer's Report within 5 days of knowledge of injury.

 *DSW volunteer DOES NOT complete this form or receive a copy.*

OR

Complete **SCIF 3267** over the phone with a Claims Reporting Representative. This expedites the claim initiation, especially for those employers without access to the paper form.

24 – hour Claims Reporting Center (888) 222-3211

3. Submit documents within time lines. DO NOT wait until you have all documents before submitting.
4. Keep copies of all documents in employer's file for injured DSW volunteer.

Required Documents	SCIF/CMS	Cal EMA	Comments
SCIF 3267	Original	Copy	Mail to SCIF/Fax to Cal EMA
SCIF 3301	Original	Copy	Mail to SCIF/Fax to Cal EMA
DSW Registration & Oath	Copy	Copy	Mail to SCIF/Fax to Cal EMA
Incident Report	Copy	Copy	Mail to SCIF/Fax to Cal EMA
Sign-in sign-out training form*	Copy	Copy	Mail to SCIF/Fax to Cal EMA

* Needed for DSW related training injuries.