Community Emergency Response Team (CERT)
Training / Membership Application

Thank you for your interest in the Upshur County WV CERT program.

Please complete this application to register for CERT training and/or program membership.
It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age or disability.

PERSONAL INFORMATION *(print clearly)*

Name: _____

Date of birth: _____

Street Address: _____

Home phone: _____

City: _____

Cell phone: _____

State: _____ Zip: _____

Work phone: _____

Email Address: _____

Valid driver license: Yes   No

EMERGENCY CONTACT INFORMATION

Name: _____

Relationship: _____

Street Address: _____

Home phone: _____

City: _____

Cell phone: _____

State: _____ Zip: _____

Work phone: _____

CERT INTERESTS

Administration

Teen / Campus Program

Animal Response

Traffic / Crowd Management

Basic CERT Volunteer

Training

Emergency Communications

Other: _____

(Continued on next page)

QUALIFICATIONS

Do you have any issues which could affect your ability to perform certain jobs safely (i.e., unable to stand for long periods of time, or unable to lift heavy objects, etc.)? *This is not disqualification from the program.

Summarize any special skills and/or qualifications acquired from employment or other activities, including hobbies or sports.

Summarize any previous volunteer work.

Agreement and Signature: By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if accepted as a volunteer, I must abide by the CERT Code of Conduct and that any false statements, omissions, or other misrepresentations made on this application may result in immediate dismissal.

Signature: _____   **Date:** _____

Printed Name: _____