



**Upshur County, West Virginia
Community Emergency Response Team (CERT)
Training / Membership Application**

Personal Information

Please complete entire form, print clearly. Do not forget to sign and date. This is a 2 page application form.

Name: _____ D.O.B.: ____/____/____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email Address: _____

Other than becoming a CERT Volunteer, please check what other areas are you interested in volunteering.

- | | |
|--|---|
| <input type="checkbox"/> CERT Trainer/Assistant | <input type="checkbox"/> Office of Emergency Management (OEM) |
| <input type="checkbox"/> Training (safety/health/etc.) | <input type="checkbox"/> Spokesperson/Speaker |
| <input type="checkbox"/> Special Community Projects | <input type="checkbox"/> Other (please list) |

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

Summarize any previous volunteer work you have done.

Person to notify in case of emergency.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

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

Printed Name: _____

Signature: _____ **Date:** _____

Our Policy: 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.

Thank you for your cooperation and completion of this application form and your interest in the Upshur County CERT Program.