Whitney Community Emergency Response Team
Volunteer Application

102 N Colorado St. Whitney, Texas 76692
(254) 694-2638 Fax (254) 694-6734
WWW.Whitneypolice.Com

Last Name _____ First Name _____ Initial _____ Current Tx Drivers Lic. _____

Home Address _____ Home Phone _____ Mobile Phone _____

Home or mailing address if different from Whitney _____

Date of Birth _____ Email Address _____

Are you currently employed? ☐ Yes ☐ No

SKILLS

- ❑ case work/social services
- ❑ Critical incident stress mgmt.
- ❑ Construction
- ❑ First responder trained
- ❑ Food services
- ❑ Medical (Dr/Nurse/EMT)
- ❑ Office Clerical
- ❑ Pastoral Care
- ❑ Transportation

Emergency Contact Information

Name: _____
Address: _____
City,State Zip _____
Phone #: _____
Relationship: _____

EXPERIENCE

Do you have volunteer experience? ☐ Yes ☐ No
If Yes, how many years? _____
What Organization? _____

DISASTER RELATED TRAINING/CERTIFICATIONS

- ❑ CERT
- ❑ CPR
- ❑ AED
- ❑ Red Cross
- ❑ Ham Radio Call _____
- ☐ FEMA IS-100
- ☐ FEMA IS-200
- ☐ FEMA IS-400
- ☐ FEMA IS-700
- ☐ FEMA IS-800

Have you ever been convicted of a felony? ☐ Yes ☐ No
If Yes, please specify what type of crime: _____

I have read and understand the Whitney CERT volunteer application. Signature below acknowledges I agree to abide by all the terms and conditions established by the Whitney CERT program and all the above statements are true to the best of my knowledge. I understand if I am accepted into the Whitney CERT program as a volunteer, any false statement, omissions or other misrepresentations made by me on this application may result in immediate dismissal. I understand photos and videos may be taken during the Whitney CERT program and used for promotional/training purposes. Additionally, I understand the information contained within this document is subject to public record laws.
Signature authorizes the Whitney Police Department to conduct a background check.

Signature _____ **Date** _____