

**STATE OF VERMONT
COMMUNITY EMERGENCY RESPONSE TEAM
(CERT)
FRANKLIN COUNTY DIVISION**

APPLICATION FOR TEAM MEMBERSHIP

Name: **Last:** _____ **First:** _____ **MI:** _____

Mailing address: _____

Residential address: _____

Phone: **Home:** _____ **Work:** _____ **Cell:** _____

Date of birth: **Day:** _____ **Month:** _____ **Year:** _____

Email: _____

Have you completed CERT basic training? **Yes:** _____ **No:** _____
If yes, please provide copy of certificate.

Please provide any other training details and any copies of certificates.

Check all that apply:

- Prior military service**
- Current military service**
- Prior EMS service**
- Current EMS service**
- Prior Fire service**
- Current Fire service**
- Prior Law Enforcement**
- Current Law Enforcement**

Details:

Have you ever been convicted of a felony? Yes: _____ No: _____

If yes give details: _____

List any special skills and training you have that would be valuable to your CERT service, including but not limited to drivers license, CDL, pilots license, scuba, search and rescue, EMS, fire, life guard, heavy equipment.

Describe any medical and physical limitations you have that may impact what you can do as a CERT member.

Do you leave the State of Vermont for long periods of time? Yes: ___ No: ___

Details: _____

Education details: _____

Please list any vehicles, tools, equipment that you own and would be willing to use when deployed to work as a CERT member.

I, _____ do hereby affirm that the information provided in, this application, is accurate to the best of my knowledge.

Applicants signature: _____ Date: _____

Do not write below this line _____

Date received: _____ Received by: _____

Approved: _____ Approved by: _____

Denied: _____ Denied by: _____

CERT ID # _____

CERT director: _____

CERT affiliation: Franklin County East: _____ Franklin County West: _____

