



**COMMUNITY EMERGENCY RESPONSE TEAM (CERT)
VOLUNTEER APPLICATION**

(Please note: You will be notified when recruitment & training is forthcoming. Qualified applicants will be screened and/or interviewed before being appointed to the team.)

NAME: _____
ADDRESS: _____
PHONE: (day) _____ (eve.) _____ (cell) _____
EMAIL: _____
OCCUPATION: _____

LEVEL OF EDUCATION COMPLETED: High school College Graduate Grad.+
ARE YOU 18 YEARS OF AGE OR OLDER? YES NO
ARE YOU A FIRST RESPONDER? Police Fire Medical Hazmat NO
ARE YOU ASSOCIATED W/ANY RELATED ORG. (ie.Red Cross) YES NO

WHY WOULD YOU LIKE TO VOLUNTEER FOR THE CERT TEAM?

IF YOU HAVE ANY OF THE SKILLS/CREDENTIALS BELOW, PLEASE CHECK and EXPLAIN:

MEDICAL____; MENTAL HEALTH/COUNSELING____; FIRE____
HAZARDOUS MATERIALS____; POLICE____; MILITARY____;
CDL OR OTHER TRANSPORTATION/ HEAVY EQUIP. LICENSES(including air/water)____; LANGUAGE SKILLS____; RADIO OPERATIONS LICENSES or SKILLS____; SUPERVISION/MANAGEMENT TRAINING or EXPERIENCE____;

ARE YOU INTERESTED IN: STAFFING A SHELTER? - YES NO
WORKING WITH ANIMALS? - YES NO

I represent that all the information that I have given in this application is true.

Applicant signature

***MAIL COMPLETED APPLICATIONS TO: Chief Christopher Leusner
MT OEM Coordinator
31 W. Mechanic Street
Cape May Court House,
NJ 08210**