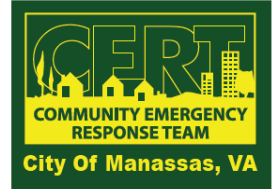




**City of Manassas Fire and Rescue Department
Community Emergency Response Team
Membership Application**
9324 West Street - Suite 103
Manassas, Virginia 20110
703-257-8458



Applicant Information

Name: _____

Address: _____

City: _____ **Zip:** _____

Telephone: _____ **Date of Birth:** _____

E-mail: _____

Employment Information

Current Employer: _____

Employer Address: _____

City: _____ **Zip:** _____

Telephone: _____ **Position:** _____

Emergency Contact

Name: _____

Address: _____

City: _____ **Zip:** _____

Telephone: _____ **Relationship:** _____

Criminal Background

Have you ever been convicted of a crime: Yes No **If YES, Please explain:**

You may omit any offense for which the record has been sealed or expunged by the Court.
Note: A Comprehensive Criminal History (CCH) report will be obtained from the Virginia State Police.

Special Skills & Interests

<p>Special skills:</p> <p><input type="checkbox"/> EMT</p> <p><input type="checkbox"/> Paramedic</p> <p><input type="checkbox"/> RN or LPN</p> <p><input type="checkbox"/> MD or DO</p> <p><input type="checkbox"/> Firefighter</p> <p><input type="checkbox"/> Law Enforcement Officer</p> <p><input type="checkbox"/> Other medical training</p> <p><input type="checkbox"/> Firefighter</p>	<p><input type="checkbox"/> Grant writing</p> <p><input type="checkbox"/> Procurement</p> <p><input type="checkbox"/> Webpage design</p> <p><input type="checkbox"/> Database design</p> <p><input type="checkbox"/> Marketing</p> <p><input type="checkbox"/> Advertising</p> <p><input type="checkbox"/> Volunteer recruitment</p> <p><input type="checkbox"/> GIS mapping</p>	<p><input type="checkbox"/> Search and Rescue</p> <p><input type="checkbox"/> Public speaking</p> <p><input type="checkbox"/> Instructor</p> <p><input type="checkbox"/> Training development</p> <p><input type="checkbox"/> Animal care</p> <p><input type="checkbox"/> Emergency shelter</p> <p><input type="checkbox"/> Traffic control</p> <p><input type="checkbox"/> Public event planning</p>	<p>Other:</p> <p>_____</p> <p>_____</p> <p>_____</p>
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**City of Manassas Fire and Rescue Department
Community Emergency Response Team
Membership Application**

I, _____, hereby certify that all statements made in this application are true. I understand that my misstatement, misrepresentation, material omission, or falsification of facts shall cause forfeiture of all rights to volunteer service with the City of Manassas CERT-Fire Corps program. I understand that all information on this application is subject to verification.

I agree to abide by and comply with all rules, regulations, policies, and practices of the City of Manassas CERT program. I understand that my volunteer service with the City of Manassas CERT program is at will, that I have the right to terminate my volunteer service at any time with or without cause, and that the City of Manassas CERT program has the same right.

I understand that as a volunteer, I have no job status and no right to employment.

I realize that certain areas of government business may involve information or documentation which is confidential or which is exempt from public disclosure. I agree, that should I ever receive or otherwise become privy to said information or documentation, that I shall maintain the same in a confidential manner and that I shall not disclose the whole or any segment thereof to any other person or entity.

I certify that I am of sound mind, and that I have reached at least my eighteenth (18) birthday preceding the execution of this Letter of Understanding or if under eighteen (18) my parent/guardian has approved my volunteer service as evidenced by their signature below.

I certify that I am physically fit to perform the work assigned. If I am unable to perform a particular assignment due to any limitations, I will immediately contact the Deputy Emergency Management Coordinator to discuss any accommodations that may be necessary.

Signature

Date

Received by CMCERT:

Signature

Date

