

West Point Fire Community Emergency Response Team Volunteer Application

Please complete and return to:
West Point Fire CERT
PO Box 315
West Point, CA 95255

Date Submitted _____

NAME _____

MAILING ADDRESS: _____

CITY _____ STATE _____ ZIP _____

EMPLOYER _____

PROFESSION _____

PHONE H _____ W _____ Cell _____

E-MAIL _____

EMERGENCY CONTACT NAME _____ PH _____

DRIVERS LICENSE# _____ ST _____ DATE OF BIRTH _____

Where did you hear about CERT and our volunteer opportunities?

Are you over 18 years of age? YES NO

If you have a disability, what accommodations would you need to do this volunteer position?

What in particular attracted you to CERT?

_____ Date submitted to Fire

Date entered _____ by _____

Are there any certain skills, training or knowledge you wish to utilize with CERT?

What training, resources or support do you anticipate needing to do this volunteer work?

Please provide two personal or professional references:

	Name	Phone Number	Relationship
1.	_____	_____	_____
2.	_____	_____	_____

Have you ever been convicted of a crime? YES NO

You may omit:

- a) Traffic violations (Driving Under the Influence convictions must be reported)
- b) Any conviction committed prior to your 18th birthday which was finally adjudicated in Juvenile Court or under a youth offender law
- c) Any incident sealed under Welfare and Institutions Code Section 781 or Penal Code Section 1203.45
- d) Any marijuana conviction, more than two (2) years old, described in Labor Code section 432.8.

If yes, please explain and give disposition: (use additional sheet if needed)

I authorize investigation of all statements contained in this application and any supporting documents and I understand that a background check may be conducted. I authorize the Calaveras Emergency Response Team, Citizen Corps, and/or The West Point Fire Protection District and its non-profit partners to secure information from the references I have provided, and release all parties from any liability arising from such investigation.

Signature of applicant: _____ **Date:** _____

CERT VOLUNTEER AGREEMENT (Must be signed by volunteer and Fire supervisor)

- _____ I agree to conform to the rules and regulations of the West Point Fire Department.
- _____ I understand that I will begin service on a reciprocal trial basis. I agree to participate in orientation and training.
- _____ I understand that a law enforcement clearance may be obtained and that references may be contacted. I am authorizing the County of Calaveras, the Calaveras Emergency Response Team Program and/or the West Point Fire Department to contact my references.
- _____ I understand my volunteer schedule and realize the community is depending on my services. If, for a serious reason, I cannot keep my commitments I will notify my supervisor in advance.
- _____ I agree and understand that any work I perform within the scope of this agreement will be provided on a voluntary basis and that I do not expect payment or other compensation for performing such work. I also understand that a volunteer position does not constitute an employee-employer relationship with the County of Calaveras, the West Point Fire Department and/or the Calaveras Emergency Response Team Program, and that I serve at the discretion of the West Point Fire Department and the Calaveras Emergency Response Team Program.
- _____ If I am currently a West Point Fire Department or Calaveras County employee I know that any volunteer work to be performed is outside of my regular job classification and is separate from any paid work responsibility.
- _____ I agree not to divulge any information regarding persons who are receiving services or other assistance from the County of Calaveras or West Point Fire Protection District or otherwise involved in my volunteer services. I recognize that unauthorized release of confidential information may make me subject to a criminal action.
- _____ I understand that I am fully responsible for maintaining my own personal records of time volunteered for the purposes of internships, community service, etc. subject to my supervisor's verification. At the end of my volunteer service I can have my supervisor sign a letter documenting hours donated, and I understand that the County of Calaveras, the West Point Fire Department nor the Calaveras Emergency Response Team Program will maintain any permanent record of this time. I understand that I will be required to sign in and out.
- _____ I understand that I am not covered under the West Point Fire Protection District workers compensation insurance in the event of an injury from rendering a volunteer service. However, I will report any injury or incident to my supervisor immediately for documentation.
- _____ I understand that the County of Calaveras and the West Point Fire Protection District have a zero-tolerance policy against any type of harassment or discrimination. I agree to comply with this policy, and recognize that I will also be protected by it.
- _____ I understand that the County of Calaveras and the West Point Fire Protection District have a zero-tolerance policy against any type of violence, threat or intimidation, implied or actual, in the workplace. I agree to comply with this policy, and recognize that I will also be protected by it.
- _____ I understand that the County of Calaveras and the West Point Fire Protection District have a zero-tolerance policy against any use of, or being under the influence of, illegal drugs or alcohol in the workplace. I agree to comply with this policy.
- _____ I understand that the County of Calaveras and the West Point Fire Protection District are not responsible for loss or damage to personal belongings.

Volunteer Signature

Date

West Point Fire Department Supervisor Signature

Date