



# GREENE COUNTY CERT VOLUNTEER APPLICATION

Please fill out completely. If the section does not apply, please write "N.A."



Name \_\_\_\_\_

Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

Cell (\_\_\_\_) \_\_\_\_\_

Home E-Mail Address \_\_\_\_\_

Military Service Branch \_\_\_\_\_ Rank \_\_\_\_\_

Education Level \_\_\_Some High School \_\_\_HS Diploma \_\_\_College Degree/Major \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Employer Address \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Work E-mail \_\_\_\_\_

## SKILLS & INTERESTS

- Law Enforcement     First Aid (current card Y/N)     CPR (current card Y/N)  
 Fire Fighting     EMS     Survival Training  
 Mechanical Ability     Structural Engineering     Licensed Daycare  
 Emergency Planning     Shelter Management     Chainsaw Operator  
 Animal Response  
 Amateur Radio operator (call sign) \_\_\_\_\_  
 Bi/Multi-lingual (what language) \_\_\_\_\_  
 Other Skills or Interests \_\_\_\_\_

Do you have a vehicle that you can use for volunteer work? \_\_\_Yes \_\_\_No

If yes: \_\_\_Car \_\_\_Truck \_\_\_Van

Have you ever been convicted of a felony? \_\_\_ Yes \_\_\_ No

Have you used or sold illegal drugs or narcotics in the last three years? \_\_\_ Yes \_\_\_ No

I verify that the above information is accurate to the best of my knowledge. I give the Springfield-Greene County Office of Emergency Management (OEM) permission to inquire into my educational background, references, licenses, police records, employment and/or volunteer history. I also give permission to the holder of any such information to release it to OEM.

I hold OEM harmless of any liability, criminal or civil, that may arise as a result of the release of this information about me. I also hold harmless any individual or organization that provides information to the above-named agency. I understand that this agency will use this information only as part of its verification of my volunteer application.

I understand this work may entail a risk of physical injury and may involve hard physical labor, heavy lifting and other strenuous activity. I certify that I am able to perform this type of work, and engage in this project at my own risk.

I also understand I may be privy to confidential information and promise to respect and maintain that confidentiality. By my signature for myself, my estate and my heirs I release, discharge and indemnify the County of Greene, the State of Missouri, the United States of America, and other organizations and entities engaged in the disaster relief of Greene County, MO.

Signed \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Greene County CERT

**Additional Information**

**\*If you are currently a Greene County CERT member and completing the application for re-certification purposes you may skip this page\***

How did you hear about our agency and/or this volunteer opportunity?

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Volunteer experience, beginning with the most recent (include position, organization, and dates)

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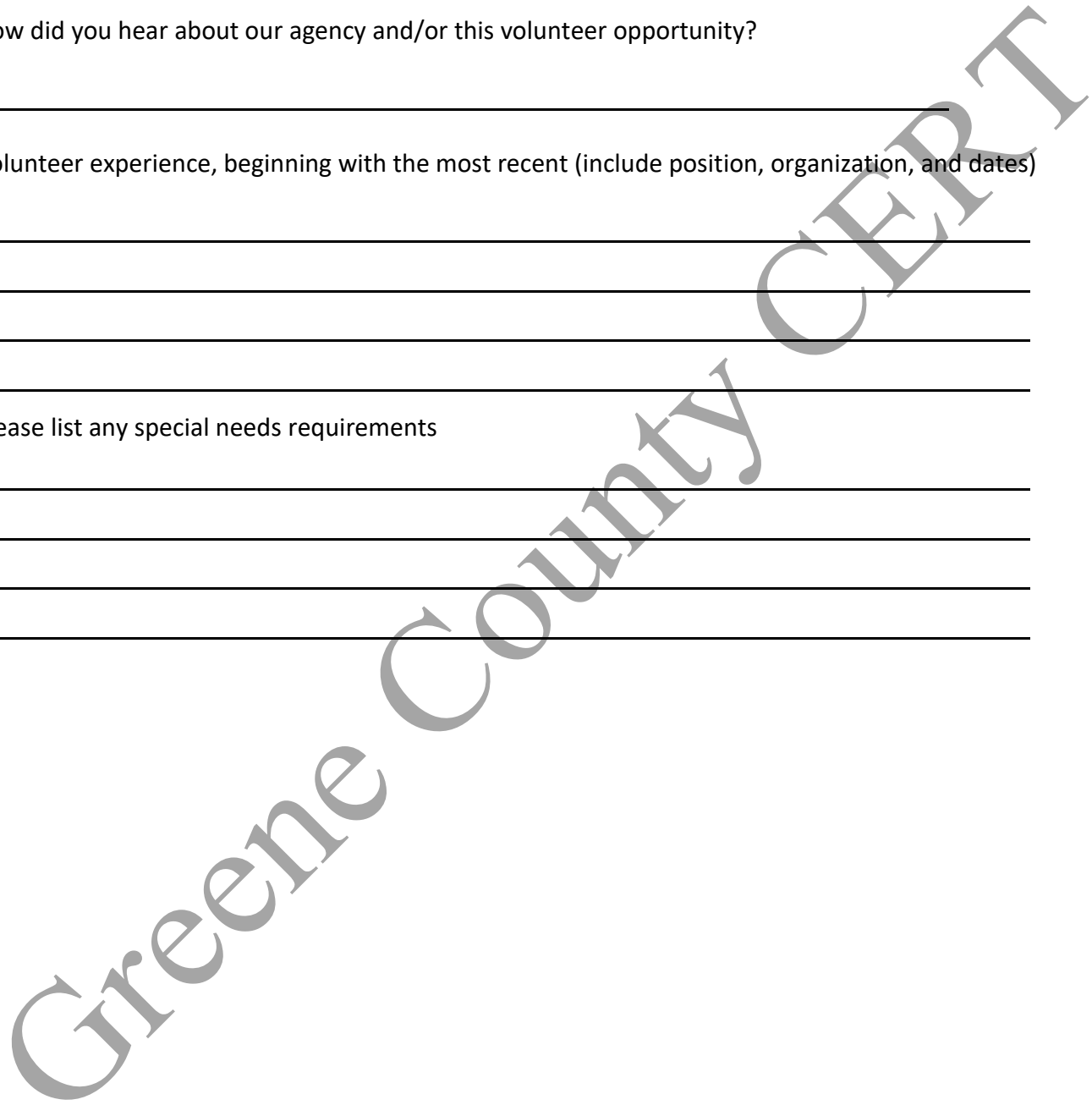
Please list any special needs requirements

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## GREENE COUNTY CERT VOLUNTEER AGREEMENT

OEM agrees to accept the services of \_\_\_\_\_ beginning \_\_\_\_\_, 20\_\_ and grants this volunteer the following rights:

- To receive sufficient information, orientation and training for continuing competence in your position;
- To be given meaningful work which utilizes and develops your interests, skills and capabilities;
- To give adequate supervision and a suitable place to work;
- To be free to discuss problems, suggestions, or changes with staff regarding ways in which we might better accomplish our respective tasks;
- To be kept informed about program activities and calendar changes;
- And to receive respect, appreciation and recognition for a job well done.

The Volunteer, \_\_\_\_\_, agrees to accept service in the Greene County CERT program and agrees:

- To abide by my commitment of service and minimum or scheduled number of hours;
- To sign in and out of each shift on a sign in sheet provided at each training/event;
- To be punctual and reliable; to contact my supervisor if unable to work as scheduled; to stay for the entire length of my assigned shift;
- To perform volunteer duties courteously and in good spirit and to the best of my ability;
- To maintain professional standards in dress, speech and safe practices, and strive to maintain a smooth working relationship within the Greene County system;
- To wear personal protective equipment (PPE) as appropriate when conducting field response operations:
- To seek guidance and request clarification when in doubt;
- To adhere to Greene County employment policies and procedures and to cooperate with my team leader;
- To check for critical and timely information and updates from OEM;
- To maintain confidentiality of information learned while volunteering with the Greene County CERT program;
- To inform my supervisor of any event or situation that is out of the ordinary;
- To return Greene County identification and issued items when leaving the program.

I hereby acknowledge that I have read and fully understand the terms and conditions of the Volunteer Agreement and the Greene County CERT SOGs and that I agree to comply with same. I further acknowledge that I have had the opportunity to get any and all of my questions regarding this agreement answered to my satisfaction.

I do hereby solemnly swear (or affirm) that I support and defend the Constitution of the United States and the Constitution of the State of Missouri against all enemies, foreign and domestic; that I will bear true faith and allegiance to the Constitution of the United States and of Missouri: that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will and faithfully discharge the duties upon which I am about to enter.

Volunteer's Signature \_\_\_\_\_ Date \_\_\_\_\_

Authorized By: \_\_\_\_\_  
Director: Office of Emergency Management      Branch Director: Greene County CERT

Greene County CERT



330 West Scott Street • Springfield, MO 65802  
Phone: 417-869-6040 • Fax: 417-869-6654  
www.oem.greencountymo.gov

## CERT Background Check Information

Date:

The Springfield – Greene County Office of Emergency Management (OEM) and the Greene County CERT Program require all volunteers to complete a background check.

In an effort to make this process as efficient as possible, please complete the steps listed below:

1. Go to <http://health.mo.gov/safety/fcsr>
2. Follow the log-in procedures and complete the required fields

The cost for the background check is \$14.25. If you are already registered with the Family Care registry, there is no additional fee for this process. You must have your social security number and a credit card to pay for this service.

After you complete the online form, you will be given an identification number. This number confirms that you are registered with the Family Care Center. You will receive a copy of your background check in the mail.

Once you receive your background check, please contact the OEM and make an appointment to bring in a copy of your background check, ICS course certificates and a completed CERT application in order to obtain a CERT identification badge and backpack.

If you have any questions or concerns regarding this process, please do not hesitate to contact me.

Thank you!

Sincerely,

Samantha Foster  
Greene County CERT Branch Director  
330 W Scott Street  
Springfield, MO 65802  
417-869-6040

