# APPLICATION FOR C.E.R.T.
# (Community Emergency Response Team)

***(Application will need to be turned in to the Chandler Fire Department)***

**Chandler Arizona**
*Where Values Make The **Difference***


LOCATION
221 E. Boston St.
Chandler, Arizona 85225
Telephone: (480) 782-2120
Fax: (480) 782-2125

MAILING ADDRESS
Chandler Fire Department
Mail Stop 801
PO Box 4008
Chandler, AZ 85244-4008


1. Name: _____ Date: _____
   Last First MI

2. Soc. Sec. No.: _____ 3. Drivers License Information: _____/_____/_____
   Number Class Expires

4. Address: _____
   Street City/State Zip

5. Home Phone: _____ Cell or Work Phone: _____ E-Mail Address: _____

6. *Emergency Call Out Phone: _____ *Text Message #:_____
   ***We may use this number to contact you in the event of a drill or real life emergency call out***

7. Birthday: ____/_____/_____ Age Category: o 18-24 o 25-60 o over 60
   Month Day Year

8. Shirt Size: o S o M o L o XL o XXL o XXXL Glove Size: o S o M o L o XL

9. Have you ever been convicted and/or placed on probation for any criminal offenses? _____ Yes _____ No
   If yes, please provide dates and detailed information (including minor offenses): _____
   _____
   _____

## PREVIOUS JOB SKILLS/VOLUNTEER EXPERIENCE

_____
_____
_____

## EMERGENCY CONTACT INFORMATION:

Name: _____ Telephone: (_____) _____

Address: _____ Relationship _____
_____

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### Statement of Accountability and Consent

By signing this application form, I certify that all information is true to the best of my knowledge. I give the City of Chandler authorization to investigate all matters contained in this application. I understand that it is my responsibility to keep the City of Chandler advised about any changes of address or phone number. I agree to obey all rules and procedures established by the City of Chandler. I further understand that I am a volunteer and therefore not entitled to any benefits which are provided to employees of the City of Chandler, that I will be fulfilling job responsibilities without receiving a salary or hourly wage, and that my placement and retention as a volunteer is at the will of the City of Chandler. I will assure all risks and/or hazards associated with participation in this program and do hereby agree to hold harmless the City of Chandler and/or its employees.

_____ _____
Signature of Volunteer Applicant Date



Revised 10-23-08