The Village of Point Venture

Emergency Management Volunteer Application

The Village of Point Venture, Texas 78645

(512) 267-5511 www.vopv.org

VOLUNTEER APPLICATION

Last Name _____ First Name _____ Initial _____ Current Texas Driver's License # _____

Home Address _____ City _____ Zip _____

Mailing Address (If different from above) _____ City _____ Zip _____

Primary Contact Number _____ ❑ Home ❑ Cell ❑ Work ❑ Pager

Secondary Contact Number _____ ❑ Home ❑ Cell ❑ Work ❑ Pager

Full Time Texas Resident? ❑ Yes ❑ No

Currently Employed? ❑ Full Time ❑ Part Time ❑ Not Employed

Date of Birth _____

Email Address _____

EMERGENCY CONTACT INFORMATION

Name: _____

Address: _____

City, State Zip: _____

Phone #: _____

Relationship

SKILLS

- ❑ Call Center
- ❑ Casework/Social Services
- ❑ Children (Formal Training)
- ❑ Critical Incident Stress Mgmt.
- ❑ Communications
- ❑ Computer Literate
- ❑ Construction
- ❑ Donations Distribution
- ❑ First Responder Trained
- ❑ Food Services
- ❑ Heavy Lifting (>30 lbs.)
- ❑ Laborer
- ❑ Logistical Support
- ❑ Neighborhood Watch
- ❑ Medical (Dr -Active/Retired)
- ❑ Medical (EMT)
- ❑ Medical (LPN/CNA/RN)
- ❑ Medical (Other)
- ❑ Moving Disabled or Elderly
- ❑ Office Clerical
- ❑ Pastoral Care
- ❑ Personnel Management
- ❑ Transportation
- ❑ Vet Tech
- ❑ Veterinarian
- ❑ Volunteer Management
- ❑ Other _____

DISASTER RELATED TRAINING/CERTIFICATIONS

- ❑ Call Center
- ❑ CERT
- ❑ CPR
- ❑ FACT
- ❑ Landing Zone
- ❑ Red Cross
- ❑ Search & Rescue
- ❑ Shelter Operations
- ❑ Ham Radio Call _____
- ❑ GMRS Radio Call _____
- ❑ IS-100
- ❑ IS-200
- ❑ IS-230
- ❑ IS-235
- ❑ IS-240
- ❑ IS-241
- ❑ IS-242
- ❑ IS-244
- ❑ IS-288
- ❑ IS-300
- ❑ IS-400
- ❑ IS-700
- ❑ IS-701
- ❑ IS-703
- ❑ IS-800

EXPERIENCE

Do you have volunteer experience? ❑ Yes ❑ No

If yes, how many years? _____

What Organization? _____

Have you ever been convicted of a felony? ❑ Yes ❑ No

If yes, please specify what type of crime and location: _____

I have read and understand The Village of Point Venture Emergency Management Disaster Volunteers Standard Operating Procedures. Signature below acknowledges I agree to abide by all terms and conditions established by these procedures and all of the above statements are true to the best of my knowledge. I understand if I am accepted as a volunteer any false statements, omissions, or other misrepresentations made by me on this application may result in an immediate dismissal. I understand photos or videos may be taken and used by The Village of Point Venture for promotional/training purposes. Additionally, I understand the information contained within this document is subject to public record laws pursuant to Texas law. Signature also authorizes The Village of Point Venture to conduct a background check and/or drug screening on me if required.

Signature _____ Date _____