# C.E.R.T. INTEREST SHEET

**[ ]  CERT (Field Deployable)** **[ ]  CERT (Administrative)** **[ ]  Public Education Only**

Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Initial \_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ St \_\_\_ Zip ­­\_\_\_\_\_\_­­

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your preferred method of contact? What is the best time of day for you to be contacted?

Please list any previous C.E.R.T. experience and training (no previous experience required):

CERT Field Deployable:

Able to fill and move sandbags

Move a patient/victim to safety

Bend, lift, and carry heavy objects

Provide First Aid care

Shut off utilities to damaged buildings

Work in all weather conditions

CERT Administrative:

Take phone calls

Keep records and logs on team activities

Radio communications

Vehicle drivers

(Please return this filled out form to Hoodland Fire.

Your information will be saved and will be contacted at a later date.)