Community Emergency Response Team (CERT) Volunteer Application

If yes, please explain;

State of issue:

Do you have a drivers license?



New Paltz

no

() yes

wost recent/curre	nt employme	nt	Full-time stu	iaent! 🗆 res	□NO
Name of Employer:					
Name of supervisor:					
Dates of employment:					
From:	То:				
Complete Address:					
Phone #:					
Job title:					
Reason for leaving, if applicable	e (be specific):				
List the jobs you held, duties pe	erformed, skills used or lo	earned, advance	ements, or promotion	s while you worked at	t this company:
May we contact your employer:	: Oyes Ono				
Please list any previous emergency response training such as; first aid, cpr, E.M.T., R.N., firefighter, etc;					
_					
Please briefly state why you wish to join the CERT.					
By my signature below, I certi understand that false stateme				e to the best of my kr	nowledge. I also
Signed By		Date			
If under 18 years old signature	e of parent/guardian	Date			
		Print For	m		

Please submit completed applications via mail or in person to; University Police-SUNY New Paltz, 1 Hawk Drive, SB 100, New Paltz, NY 12561. Attention David Dugatkin or Scott Schulte. You can also print out the form, scan it into your PC and e-mail it to; sunycert@newpaltz.edu