



Lincoln County Emergency Management Volunteer Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____

Position Applied for: _____

Are you a licensed HAM operator? YES NO Do you have a 150 Mhz radio? YES NO

Have you had NWS storm spotter training in the last 12 months? YES NO If yes, when? _____

Do you have any ICS/NIMS training? YES NO IS-100 IS-200 ICS-300 ICS-400 IS-700 IS-800
Circle the courses you have taken. Attach certificates with application for the above completed training and any other relevant training you have completed.

Have you been convicted of a felony, violent crime, financial crime, or any other serious crime? YES NO If yes, explain? _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____



References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO



Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. I also understand that working as a volunteer for Lincoln County Emergency Management that I work at my own risk, and as such will not hold Lincoln County responsible for any liability while performing any duties or assigned tasks. I also understand that I will not self-dispatch to any emergency or represent myself, if chosen as a volunteer, in any misleading manner.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

