

CCADT VOLUNTEER APPLICATION (Continued)

ADDITIONAL CERTIFICATIONS

List any additional emergency response or animal rescue organizations certifications that you have. **Include a copy of certificates with application.**

CERTIFICATION	DATE OF COMPLETION

TRAINING & EXPERIENCE

Please identify any additional skills/experience that you may offer. For any animal rescue training, include a copy of certificate with application.

____ Animal Sheltering Experience If yes, where? _____

____ Animal Rescue Experience If yes, where or what organization? _____

____ Livestock Handling What types of livestock? _____

____ Equine Experience ____ Experience in safely loading a horse into a trailer? ____ Yes ____ No

____ Experience driving horse, stock, or utility trailers ____ Gooseneck ____ Bumper Pull

____ Bird Handling List types: _____

____ "Pocket Pets" (i.e. rodents, guinea pig, hamster) List type(s): _____

____ Reptile Handling List types: _____

____ Wildlife Rehabilitation Where? _____

____ Swift or Flood Water Rescue (include certificate of completion)

____ Veterinary Assistance Please list type of license (i.e. DVM; RVT, VT) _____

____ Technical Animal Rescue (include certificate of completion)

____ Volunteer Management

____ Donations Management

____ Administrative / Clerical Skilled in: ____ MS Word ____ Excel ____ Data Entry

____ Public Speaking ____ Experience as a Media Spokesperson

____ Foreign Language(s); please list: _____

____ Experience driving heavy/farm equipment

____ Construction/General Repairs

Additional: _____

CCADT VOLUNTEER APPLICATION (Continued)

VACCINE HISTORY

Important: Please include copy of your vaccine documentation with your application

VACCINE	DATES
Tetanus	
Hepatitis A	
Hepatitis B	
Pre-Exposure Rabies	

I understand that based on the completion of the CCADT volunteer application and disclaimer forms, the screening process, and any available volunteer training and orientation, the CCADT CEO and the Operations Director reserves the right to determine who will be approved as a volunteer. During an incident, volunteers will be deployed at the discretion of the CCADT CEO and/or Operations Director.

I understand that volunteering with the CCADT may require travel to an incident within one of the seven counties - Fresno, Madera, Kings, Tulare, Mariposa, Merced, and Kern; and may require me from being away from my job and home for a pre-determined length of time. I understand that travel costs may not be reimbursed either before, during, or after the deployment. I will not be compensated for my deployment time.

If called upon, I understand that I'm not obligated to participate in any response.

While working with the CCADT at a deployment, I am expected to abide by the organization's professional Code of Conduct. I agree to abide by the authority of the CCADT and the county's emergency response agencies (law enforcement, animal control, fire department, etc.) and to follow instructions while participating under their leadership.

By signing below, you agree that you have read and understand the above disclaimer, and that all information you have provided in the application is true and accurate.

Signature: _____

Printed Name: _____

Date: _____