



## Cowley County Emergency Auxiliary (CCEA) Volunteer Application

Name (Last, First, Middle): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Cell phone: \_\_\_\_\_ Cell provider: \_\_\_\_\_

E-mail: \_\_\_\_\_

Drivers license number and state: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Employer: \_\_\_\_\_

How long at present job? \_\_\_\_\_

Work hours or schedule: \_\_\_\_\_

What hours would you be available? \_\_\_\_\_

Emergency contact name: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Do you have any previous volunteer experience? \_\_\_\_\_

If so, please provide a brief description of your experience, as well as approximate dates and locations:

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Please indicate any special training or skills, such as CPR/First Aid, MD/RN/DVM or other medical certification, bilingual/multilingual, amateur radio operator, etc.

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Do you have access to transportation for travel to and from a volunteer assignment? \_\_\_\_\_

Have you ever been convicted of a criminal offense (misdemeanor or felony)? \_\_\_\_\_

If yes, state the offense, date, location, disposition and current status:

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I hereby certify I have filled out the above application truthfully and accurately. I further understand that a limited background check will be conducted by or on behalf of Cowley County, and I agree to allow the release of information as necessary for such an investigation.

Signature \_\_\_\_\_

Date \_\_\_\_\_

