

# Dodge County Emergency Response Team

## Membership Application

Name: First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Cell#: \_\_\_\_\_ Carrier: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_ Exp Date: \_\_\_\_\_  
Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Vehicle Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate: \_\_\_\_\_

Are there any other names under which you may have worked or attended school?

No  Yes, List Names:

Have you ever been convicted of a crime or pleaded no contest for any offense or violation other than minor traffic violations?

No  Yes

If yes explain

a) Nature of the crime, b) date of conviction, c) state in which convicted.

Do you have any pending criminal charges against you?

No  Yes

If yes describe

a) Nature of the charges, b) date issued, c) county and state where issued.

Have you ever applied here before?

No  Yes, When: \_\_\_\_\_

How were you referred to DCERT?

Friend  Relative  Other

Name of Individual: \_\_\_\_\_

What skills, experience, training, or certifications do you have that will be of an asset to DCERT?

<u>Education</u>	<u>Diploma or Degree Rec'd</u>	<u>Year Graduated</u>
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Equipment Available In Emergency (Radios, Safety Equipment, Etc.):

# NOTICE TO APPLICANTS

Dodge County Emergency Response Team (DCERT) is committed to its legal and moral obligations to provide a safe, healthy, secure workplace for its members. Because alcohol and drug abuse can result in injuries, health impairment, work performance deterioration and property damage, it is DCERT's intent to provide an alcohol and drug free environment.

Accordingly, DCERT will not accept or retain anyone who abuses alcohol and/or drugs. Alcohol and drug abuse is defined as use of natural or synthetic chemical substances for non-medical reason to affect the body and its processes, the mind, nervous system, behavior and emotions.

## SEXUAL HARASSMENT POLICY

DCERT will endorse the principle that all members have the right to work in an environment free from verbal or physical harassment, which is sexual in nature. DCERT does not condone sexual harassment, which by law is defined as:

Unwelcome sexual advances or other verbal or physical conduct of asexual nature where submission to such conduct is made either explicitly or implicitly, a term or condition of employment or a basis for any employment decision, or such conduct creates an intimidating, hostile or offensive work environment.

We will not condone such conduct, and appropriate disciplinary action will be taken against anyone engaging in such conduct. Sexual harassment is a serious offense and disciplinary action may be taken up to and including discharge.

The President is responsible for the implementation of this policy and for ensuring that all members have knowledge of and understand this policy. All members will be held responsible and accountable for avoiding or eliminating this prohibited conduct. It is the policy of DCERT, to treat all complaints of sexual harassment with respect and confidentiality and with high regard for the personal privacy of all concerned parties. Any complaints of sexual harassment or questions regarding this policy should be directed to the President. The President will be responsible for investigating such complaints and recommending appropriate action to resolve a complaint.

## DISCRIMINATION POLICY

It is the policy of DCERT to provide equal membership to all individuals regardless to their race, creed, color, religion, sex, age, national origin, handicap, veteran status or other area of prohibited discrimination. We are strongly committed to this policy and believe in the concept and the spirit of the law. DCERT is further committed to assuring that all recruiting, hiring, training, promotion, compensation, ect., programs are granted fairly to all persons on an equal opportunity basis without regard to race, creed, color, religion, sex, age, national origin, handicap, veteran status or other area of prohibited discrimination. The President has the overall responsibility of assuring compliance with the policy. All members are responsible for supporting this concept and assisting DCERT in meeting this goal.

To determine my qualifications for membership, I authorize DCERT to conduct an investigation of my application. I understand that any false or misleading information furnished by me on this application form or in connection with my application for membership may result in rejection of the application, or if accepted by DCERT, in the termination of membership. I also verify that I have read and understand all the policies contained with this application.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_