

## **Volunteer Application**



## Return completed application to:

City of Austin Office of Homeland Security and Emergency Management P.O. Box 1088, Austin, TX 78767
Phone (512) 974-0471 \* Fax (512) 974-0499
sonia.goodman@austintexas.gov

If you fax your application please follow up if you have not heard back with in a week. Faxes do get lost!

Name (Last, First, M.I.)		Driver License No. and State:
Address, City, State, Zip		How did you hear about us?
Cell Phone/Home Phone		Current or former volunteer work:
Work Phone		
E-mail Address		
Employment History		
Current employment status:  Employed  Not Employed  Retired  Student (18 or older)	If employed, name and address of employer:	
Your current or former occupation:	Are you a COA Volunteers in Police Service member?	
Character References		
Please list two character references:		
Name:	Name:	
Address:	Address:	
Phone:	Phone:	
Relation:	Relation:	

## **Signature**

I certify that the above information is complete and true. I understand that references will be contacted and a background check processed. I understand that the City of Austin Office of Homeland Security and Emergency Management (HSEM) is not obligated to assign me if, in HSEM's professional judgement, it would not be in my best interest or the best interest of HSEM. I agree that my application or membership may be rejected or terminated by HSEM at any time.

Applicant's Signature:

Date:

Effective Date: 07/20.