



FOR OFFICE USE ONLY	
VOLUNTEER #:	_____
Orientation:	_____
Interview:	_____

Tri- County Animal Response Team
Serving Essex, Clinton, and Franklin Counties

Volunteer Application

GENERAL INFORMATION (PLEASE PRINT CLEARLY)

Name:		Are you 18 or older?	
Street Address:			
City:		County:	
State:		Zip Code:	
Home Phone:	Day Phone:		Mobile Phone:
Email Address:			Pager:
Do you have any allergies/conditions that might affect your volunteer work? If Yes, Please Describe:			

EMERGENCY CONTACT

Name:			
Street Address:			
City:		State:	
Zip Code:			
Home Phone:	Day Phone:		Mobile Phone:

EMPLOYER INFORMATION

Employer(s) Name:			
Street Address:			
City:		State:	
Zip Code:			
Contact Name/Position:			
Phone Number:		Position held:	

WILLING TO RESPOND TO INCIDENTS:

COUNTY: _____ **YES** _____ **NO**
REGIONAL: _____ **YES** _____ **NO**
STATE: _____ **YES** _____ **NO**

EQUIPMENT/FACILITIES AVAILABLE:

EQUIPMENT, SUPPLIES OR FACILITIES YOU WOULD LIKE TO DONATE THE USE OF FOR DISASTER RESPONSE OR SART TRAINING. PLEASE LIST:

EDUCATION

High School/GED Graduate: YES	NO
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College ____ yrs	Degree/Field of Study:
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Technical School:	Certification/License:
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Specialized Training:	Certificates:
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Vehicle & Other Licenses:	Expiration dates:
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Classes Attended In Field Relevant To This Work:

SKILLS AND EXPERIENCE

Veterinarian, ____ yrs

Fire Fighter/HAZMAT, ____ yrs

Farm/Stable experience, ____ yrs

Veterinary Technician, ____ yrs

Law Enforcement, ____ yrs

Zoo (animal care) experience, ____ yrs

Veterinary Assistant, ____ yrs

Humane Investigator, ____ yrs

Remote Chemical Capture, ____ yrs

Euthanasia Technician, ____ yrs

Animal Control Officer, ____ yrs

Counseling experience, ____ yrs

Emergency Medical Technician, ____ yrs

Dog Control Officer, ____ yrs

Military, ____ yrs

RN/LPN/PA, ____ yrs

Shelter/Kennel Attendant, ____ yrs

Boating experience, ____ yrs

Boarding Kennel Operator, ____ yrs

Pet Groomer, ____ yrs

Truck & Trailer driving, ____ yrs

Disaster Response, ____ yrs

Wildlife Rehabilitator, ____ yrs

Heavy Equipment Operator, ____ yrs

Animal Shelter E.D./D.O., ____ yrs

Donations Management, ____ yrs

Marketing/Fundraising, ____ yrs

Non-Profit/Charity work ____ yrs

Animal Behaviorist, ____ yrs

Public Speaker/Media, ____ yrs

Teacher ____ yrs Of: _____

Animal Husbandry, ____ yrs

CERT/Red Cross, ____ yrs

Administration/Clerical ____ yrs

Web Design, ____ yrs

Communications/IT, ____ yrs

Other _____, ____ yrs

PLACEMENT

Please circle the activities that interest you.

Small Animal Handling/Rescue/Recovery	Large Animal Handling/Rescue/Recovery
Sheltering/Foster Care	Triage/Veterinary Services/Mortality Management
Health/Safety	Counseling
Administration/Records/Time Unit	Information Technology/Communications
Finance/Accounts	Donations/Supply Management
Resource Procurement	Public Outreach/Education
Incident Action Planning/Mob. & Demobilization	Newsletter

Have you been convicted of a violent crime or animal cruelty within the last 7 years? Yes No
(Conviction will not necessarily disqualify applicant from volunteering.)

If yes, please explain:

Have you ever been denied membership from any CART? Yes No

If yes, please explain:

Required Trainings:

- ESART Orientation** - online at <http://www.ualbanycphp.org/learning/default.cfm>
- Incident Command System 100** – online at <http://training.fema.gov/EMIWeb/IS/is100a.asp>
- Incident Command System 200** – online at <http://training.fema.gov/EMIWeb/IS/is200a.asp>
- National Incident Management System 700** – online at <http://training.fema.gov/emiweb/is/is700.asp>
- Hazmat Awareness** – online at http://www.saferesponse.com/sub_page/hazmat_main.htm
- Code of Conduct** - online at <http://www.empiresart.com/pdfs/Code%20of%20Conduct.pdf>

CERTIFICATION

I hereby affirm that my answers to the foregoing questions are true and correct and that I have not knowingly withheld any facts or circumstances which would, if disclosed, affect my application unfavorably. I understand that any false statements, representations or failure to disclose pertinent information will be considered sufficient cause for disqualification from consideration for volunteer service or immediate discharge. I understand also, that I am required to abide by all rules and regulations of the Tri-County Animal Rescue Team .

I understand and agree that my position in CART is entirely voluntary and without compensation. I further understand that nothing contained in this volunteer application or in the granting of an interview is intended to create an expressed or implied volunteer contract between the CART and myself. No promises regarding volunteer work or any duration of volunteer service have been made to me and I understand that no such promise is binding on the CART unless made in writing. I further understand and agree that if I am offered and accept a volunteer position in CART, my volunteering can be terminated with or without cause, and with or without notice, at any time, at the option of the CART.

I understand and agree that my volunteer position is contingent upon, among other things, my signing the CART Volunteer Agreement and Code of Conduct; ***I understand there are base-level training requirements established by CART that I must successfully complete. Training requirements will be confirmed by my respective County representative.***

I hereby certify that I have read the foregoing material and understand the contents thereof.
I understand that a background check may be conducted.

Applicant’s Signature:

Date:

MAIL TO YOUR RESPECTIVE COUNTIES:

**ESSEX COUNTY EMERGENCY SERVICES
702 STOWERSVILLE RD
LEWIS, NY 12950 ATTN: E-CART**

**CLINTON COUNTY EMERGENCY SERVICES
16 EMERGENCY SERVICES DRIVE
PLATTSBURGH, NY 12903 ATTN: CART**

**FRANKLIN COUNTY EMERGENCY SERVICES
55 BARE HILL ROAD
MALONE, NY 12953 ATTN: CART**

FOR MORE INFORMATION ABOUT THE STATE ANIMAL RESPONSE TEAM, ESART, GO TO WWW.EMPIRESART.COM

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REQUIRED TRAINING	DATE	ADDITIONAL TRAINING	DATE
ESART ORIENTATION		RED CROSS 1 ST AID	
ICS 100		RED CROSS CPR	
ICS 200		TECH ANIMAL RESCUE	
NIMS 700		TECH LARGE ANIMAL RESCUE	
HAZMAT AWARENESS		ICE RESCUE	
CODE OF CONDUCT		ICS 300	
		HAZMAT 8 HR	
		HAZMAT 16 HR	
		HAZMAT 24 HR	
		HAZMAT 40 HR	
		EMERGENCY ANIMAL SHELTERING	
		NACA OR EQUIVALENT	
		CERT	

MEDICAL INFO	DATE		DATE
TETANUS		INFLUENZA	
HEP A		OTHER	
HEP B		INSURANCE COMPANY	
RABIES PRE-EXPOSURE		INSURANCE LD.	