



# VOLUNTEER APPLICATION

Thank you for your interest in volunteering with RB United's programs.

## Personal Information:

Name:

Street Address:

City:  State:  Zip:

Home Phone:  Cell Phone:

Email Address:

Career Background:

Emergency Contact Information (Name, phone):

Preferred method of communication:  Home Phone  Cell  Email  Text

## Areas of Interest (check all that apply):

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Fire Safe Council                   | <input type="checkbox"/> Fundraising                           | <input type="checkbox"/> Community Education                          |
| <input type="checkbox"/> Brush Mitigation                    | <input type="checkbox"/> Safety Fair                           | <input type="checkbox"/> Youth Working Group                          |
| <input type="checkbox"/> Wildfire Home Assessment Instructor | <input type="checkbox"/> RB Village – Aging In Place Volunteer | <input type="checkbox"/> "Y Public Service" Community Service Program |

## Readiness Areas of Interest:

Using the lists below, place a check in the box indicating those areas where you have interest, or experience and would like to serve or act in an advisory capacity:

### Preparedness

- Staffing at Special Events
- Website & Social Media
- Training

### Recovery

- Recovery Mentor
- Community Recovery Team
- Local Assistance Center Volunteer
- Insurance Advocacy
- Clean-up Projects
- Staff Recovery Events

### Response

- Neighborhood Coordinator
- Logistics
- Communications
- Mass Shelter Volunteer
- Large Animal Support Team
- Damage Assessment

### Work Group(s) interested in (Response only):

- Community-Based Shelter
- Communications
- Vulnerable Populations
- Children & Youth
- Preparedness & Education
- Large Animal Support Team

## Affiliations:\*

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Community Recovery Team     | <input type="checkbox"/> SD VOAD               | <input type="checkbox"/> The Salvation Army          |
| <input type="checkbox"/> American Red Cross          | <input type="checkbox"/> Medical Reserve Corps | <input type="checkbox"/> Interfaith Disaster Council |
| <input type="checkbox"/> CERT                        | <input type="checkbox"/> Teen CERT             | <input type="checkbox"/> ARES                        |
| <input type="checkbox"/> Other: <input type="text"/> |  |  |

\*If affiliated with another disaster group, please indicate the priority number this volunteer position would be in the event of a disaster, 1 being your first priority, 2 being your next, etc.:

**Certifications:**

- CA Driver's License                       Ham Radio Operator                       CBT Shelter Worker  
 Operating Equipment Licenses:   
 Other:

**General Skills : Please indicate if you have experience (E) and/or training (T) in any of the following:**

**Animals**

- |                                |                          |                          |
|--------------------------------|--------------------------|--------------------------|
|                                | <b>E</b>                 | <b>T</b>                 |
| Animal Handling/Transportation | <input type="checkbox"/> | <input type="checkbox"/> |
| Pet/Animal Operations          | <input type="checkbox"/> | <input type="checkbox"/> |
| Veterinary                     | <input type="checkbox"/> | <input type="checkbox"/> |
| Veterinary Support Staff       | <input type="checkbox"/> | <input type="checkbox"/> |

**Communications**

- |                       |                          |                          |
|-----------------------|--------------------------|--------------------------|
|                       | <b>E</b>                 | <b>T</b>                 |
| Communications        | <input type="checkbox"/> | <input type="checkbox"/> |
| Ham Radio Operator    | <input type="checkbox"/> | <input type="checkbox"/> |
| Communication Systems | <input type="checkbox"/> | <input type="checkbox"/> |
| Language Services     | <input type="checkbox"/> | <input type="checkbox"/> |

**CERT**

- |                         |                          |                          |
|-------------------------|--------------------------|--------------------------|
| CERT Basic              | <input type="checkbox"/> | <input type="checkbox"/> |
| CERT Instruction        | <input type="checkbox"/> | <input type="checkbox"/> |
| CERT Program Management | <input type="checkbox"/> | <input type="checkbox"/> |

**Finance & Administration Staff**

- |                        |                          |                          |
|------------------------|--------------------------|--------------------------|
| Admin/Office Support   | <input type="checkbox"/> | <input type="checkbox"/> |
| Information Technology | <input type="checkbox"/> | <input type="checkbox"/> |
| Volunteer Management   | <input type="checkbox"/> | <input type="checkbox"/> |

**Law Enforcement**

- |                 |                          |                          |
|-----------------|--------------------------|--------------------------|
| Law Enforcement | <input type="checkbox"/> | <input type="checkbox"/> |
|-----------------|--------------------------|--------------------------|

**Laborer**

- |                                   |                          |                          |
|-----------------------------------|--------------------------|--------------------------|
| Building Trades/Home Construction | <input type="checkbox"/> | <input type="checkbox"/> |
| Debris Clean-up/Removal           | <input type="checkbox"/> | <input type="checkbox"/> |
| Emergency Roof Repairs/Tarps      | <input type="checkbox"/> | <input type="checkbox"/> |
| Hand Crews                        | <input type="checkbox"/> | <input type="checkbox"/> |

**Human Services**

- |                                    |                          |                          |
|------------------------------------|--------------------------|--------------------------|
| Case Management                    | <input type="checkbox"/> | <input type="checkbox"/> |
| Children Services                  | <input type="checkbox"/> | <input type="checkbox"/> |
| Disaster Stress Management/CISM    | <input type="checkbox"/> | <input type="checkbox"/> |
| Financial Consulting/Assistance    | <input type="checkbox"/> | <input type="checkbox"/> |
| Food Distribution                  | <input type="checkbox"/> | <input type="checkbox"/> |
| Food Preparation/Mass Feeding      | <input type="checkbox"/> | <input type="checkbox"/> |
| Access and Functional Needs        | <input type="checkbox"/> | <input type="checkbox"/> |
| In-Home Support Services           | <input type="checkbox"/> | <input type="checkbox"/> |
| Long Term Recovery                 | <input type="checkbox"/> | <input type="checkbox"/> |
| Pastoral/Chaplaincy/Spiritual Care | <input type="checkbox"/> | <input type="checkbox"/> |
| Shelter Management Support         | <input type="checkbox"/> | <input type="checkbox"/> |
| Training                           | <input type="checkbox"/> | <input type="checkbox"/> |

**Fire**

- |                 |                          |                          |
|-----------------|--------------------------|--------------------------|
| Fire Fighting   | <input type="checkbox"/> | <input type="checkbox"/> |
| Fire Prevention | <input type="checkbox"/> | <input type="checkbox"/> |

**Community Education**

- |                 |                          |                          |
|-----------------|--------------------------|--------------------------|
| Public Speaking | <input type="checkbox"/> | <input type="checkbox"/> |
|-----------------|--------------------------|--------------------------|

**Languages: Please indicate if you speak (S), read (R) and/or write (W) any of the following languages.**

- |         |                          |                          |                          |            |                          |                          |                          |          |                          |                          |                          |
|---------|--------------------------|--------------------------|--------------------------|------------|--------------------------|--------------------------|--------------------------|----------|--------------------------|--------------------------|--------------------------|
|         | <b>S</b>                 | <b>R</b>                 | <b>W</b>                 |            | <b>S</b>                 | <b>R</b>                 | <b>W</b>                 |          | <b>S</b>                 | <b>R</b>                 | <b>W</b>                 |
| English | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Vietnamese | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Japanese | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Spanish | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Chinese    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | French   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tagalog | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Korean     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Persian  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|         |                          |                          |                          |            |                          |                          |                          | German   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|         |                          |                          |                          |            |                          |                          |                          | Other:   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|         |                          |                          |                          |            |                          |                          |                          |          | <input type="text"/>     |                          |                          |

**Do you have any Access or Functional Needs? Yes  No**

If yes, please describe:

- Available:**    Monday    Tuesday    Wednesday    Thursday    Friday    Saturday    Sunday  
 Disaster/Emergency    All Other Events