



Public Health
Prevent. Promote. Protect.

JO DAVIESS COUNTY HEALTH DEPARTMENT

9483 US-RT. 20 WEST • P. O. BOX 318 • GALENA, ILLINOIS 61036 • (815) 777-0263

PUBLIC HEALTH EMERGENCY VOLUNTEER APPLICATION

Name _____

Address _____

City/State/Zip Code _____

Telephone Number (Home) _____ Cell _____

E-Mail Address _____

Special Training, License or certifications (e.g., RN, LPN, MD, CPR, Ham Radio Operator, etc.) _____

Professional License _____ State _____ Exp Date _____

Are you a licensed driver? _____ If yes, what state & exp date? _____

Do you speak any language other than English? If yes, specify _____

List any skills or previous experience you may have that would be helpful. _____

Do you know how to operate a computer? YES NO Software familiarity _____

Do you know how to operate office machines (copier, fax, etc)? _____

Do you have any health issues or disabilities that we need to be aware of? _____

If yes, please explain. _____

Person to notify incase of emergency Name: _____

Address: _____ City: _____ State _____ Zip _____

Relationship _____ Phone # _____ Alternate# _____

I hereby certify the information I have supplied above is true and accurate, that I am freely volunteering for such duty without coercion or duress and that I am mentally and physically fit for service. I understand the information that I have supplied may be disclosed for security reasons. I understand that I may be assigned to a variety of duties, but that every reasonable effort will be made to find a good match with my interests and skills. Finally, I understand this is a totally volunteer effort and I will not be paid for my services.

Signature _____ Date _____

Name: _____

Skills: Please circle the skills you possess or tasks for which you feel both qualified and comfortable.

Disaster Skills	Office Skills	People Skills	Manual Skills
Safety Assessment	Message Runner	Child Care	Care & Shelter
Medical	Answering Phones	Animal Care	Heavy Labor
Security	Data Entry	Medical	Driver
Traffic Control	Accounting	Customer Service	Food Prep/Service
Other (Specify Below)	General Clerical	Special Populations	Skilled Trade

Describe any restrictions on your activities (physical, medical, mental):

What are you most interested in doing:

What new skills would you like to learn?

Any additional comments
