

Keokuk Volunteer Emergency Corps Membership Application

Office: 501 Mississippi Drive, Keokuk, Iowa 52632

Email: info@emergencycorps.org | Website: www.emergencycorps.org

(Print this application and give it to any KVEC member after it's filled out completely.)



Personal Information

- Full Name:

- Date of Birth:

- Gender:

☐ Male

☐ Female

- Home Address:

- City:

- State:

- Zip Code:

- **Phone Number:**

- **Email Address:**

- **Emergency Contact Name:**

- **Emergency Contact Phone Number:**

- **Relationship to Emergency Contact:**

Availability

- **Are you available for:**

- ☐ Weekdays
- ☐ Weekends
- ☐ Evenings
- ☐ On-Call Emergencies

- **How many hours per week can you volunteer? _____**

- **Are you willing to undergo a background check?**

Note: A criminal record may not necessarily void your membership application.

- ☐ Yes

☐ No

Skills and Experience

- Do you have any previous experience in emergency services, search and rescue, or related fields?

☐ Yes

☐ No

If yes, please describe:

- Do you have any certifications or licenses relevant to emergency services?

☐ Yes

☐ No

If yes, please list them:

Please describe any special skills or qualifications you have that would benefit KVEC:

Volunteer Interests

- Please indicate the areas you are most interested in volunteering:
 - ☐ Water Search and Rescue
 - ☐ Communications
 - ☐ Logistics and Support
 - ☐ Training and Education
 - ☐ Fundraising and Events
 - ☐ Administrative Support
 - ☐ Other:

References

Please provide two references who can speak to your character and qualifications.

1. **Reference Name:**

Phone Number:

Relationship:

2. **Reference Name:**

Phone Number:

Relationship:

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

• **Signature:** _____

• **Date:** _____

For KVEC Office Use Only

• **Date Application Received:** _____

• **Interview Date:** _____

• **Background Check Completed:**

☐ Yes

☐ No

• **Application Status:**

☐ Approved

☐ Denied

○ **Remarks:**

Thank you for your interest in volunteering with the Keokuk Volunteer Emergency Corps.

We will review your application and contact you shortly. For any inquiries, please contact us at info@emergencycorps.org.