

# HAMILTON COUNTY EMA CITIZEN CORPS

## APPLICATION FORM

Please provide the following contact information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I am interested in serving our community and our country by being a part of the Hamilton County Emergency Management Agency's Citizen Corps. I wish to volunteer in the city/township/village of:

\_\_\_\_\_.

I am interested in (you may choose more than one):

- Neighborhood Watch Program (NWP)
- Volunteers in Police Service (VPS)
- Community Emergency Response Team (CERT)
- Medical Reserve Corps (MRC)
- Terrorism Awareness and Prevention (TAP)

In addition, I offer the Citizen Corps the following special skills:

Please mail, email or fax your application to: HAMILTON COUNTY EMA  
ATTN: PEGGY DZIECH  
2000 Radcliff Dr.  
Cincinnati, OH 45204  
Fax: 513-263-8222  
[Peggy.dziech@hamilton-co.org](mailto:Peggy.dziech@hamilton-co.org)