

# NYAC Early Response Team (ERT) Application

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ Email address: \_\_\_\_\_

Church: \_\_\_\_\_

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

Pastor's Name and Phone #: \_\_\_\_\_

Print Your Name Exactly As It Appears on Your Passport: \_\_\_\_\_

Passport Number: \_\_\_\_\_ Expiration Date of Passport: \_\_\_\_\_

Occupation: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Do you hold a professional license or specialized certification (e.g. MD, RN, PE, EMT, Pastoral Counseling), explain?  
\_\_\_\_\_

Are you CPR certified? Yes No Are you AED certified? Yes No Are you certified in Standard First Aid? Yes No

Do you have a current UMCOR ERT Badge? Yes No If no, did you take the ERT training class and, if so, when?  
\_\_\_\_\_

Have you ever served on an ERT or Disaster Recovery Team? Yes No

If so, indicate where? \_\_\_\_\_

Have you ever served on a VIM team? Yes No If so, indicate where? \_\_\_\_\_

Who served as your team leader? \_\_\_\_\_

What languages do you speak? \_\_\_\_\_

Please check the special skills you possess and indicate applicable skill level: professional, excellent, good, fair.

\_\_\_\_\_ Construction \_\_\_\_\_ Electrical \_\_\_\_\_

\_\_\_\_\_ Masonry \_\_\_\_\_ Other \_\_\_\_\_

Why do you wish to participate? \_\_\_\_\_

Scheduled dates for which I'm able to serve in Haiti: 1st Choice \_\_\_\_\_ 2nd Choice \_\_\_\_\_

ERT trips are typically 8-10 days and require rigorous activity and the hours may be long, is there anything the team leader(s) should know regarding your health (including allergies, diet, etc.) or special needs? \_\_\_\_\_

I understand that team members must be cooperative, flexible, and patient. I agree to cooperate with the team leader(s) concerning our life together, including daily assignments, food, lodging, transportation and any other activities involving the team as a whole. I agree to stay with the team from the beginning to end of the trip (except as excused by the team leader), to abstain from the use of alcohol and tobacco while on the trip, and to behave in a Christian manner.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

### To Be Completed by the Applicant's Pastor:

I believe that the above applicant is a dedicated Christian, a team player, and a friendly, flexible person who will make a valuable contribution to this team. I am / am not personally acquainted with the applicant and recommend her/him for volunteer mission service. You may contact me for additional information if needed.

Pastor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail completed application to: Rev. Joseph Ewoodzie, NYAC Mission Coordinator, 20 Soundview Ave, White Plains, NY 10606-3302  
Revised: May 2010