

Village of South Barrington

30 South Barrington Road
South Barrington, IL 60010
Ph 847-381-7510 / Fx 847-381-0024

NON-MEDICAL
Complete this page

COMMUNITY EMERGENCY VOLUNTEER NON-MEDICAL

Date:		<u>CHECK ONE:</u>		<input type="checkbox"/> INITIAL APP	<input type="checkbox"/> RENEWAL
<u>PERSONAL INFORMATION:</u>					
Name:				Home phone:	
Home Address:				Cell phone:	
				Email 1:	
				Email 2:	
Drivers License:					
<u>SIGNATURE:</u>					
Occupation:					
Employer:				Office phone:	
Office Address:					
Languages:					
<u>AVAILABILITY:</u>		<input type="checkbox"/> Year round or which months:			
		Days:	<input type="checkbox"/> Monday	Hours:	
			<input type="checkbox"/> Tuesday		
			<input type="checkbox"/> Wednesday		
			<input type="checkbox"/> Thursday		
			<input type="checkbox"/> Friday		
			<input type="checkbox"/> Saturday		
			<input type="checkbox"/> Sunday		
<u>VOLUNTEER POSITIONS: Check as many as may apply</u>					
<input type="checkbox"/> Set Up/Take Down		<input type="checkbox"/> Screening Supervisor		<input type="checkbox"/> Food Preparation	
<input type="checkbox"/> Line Management		<input type="checkbox"/> Elderly Assistance		<input type="checkbox"/> Loading/Unloading	
<input type="checkbox"/> Hospitality/Greeter		<input type="checkbox"/> Childcare Assistance		<input type="checkbox"/> Transportation/Delivery	
<input type="checkbox"/> Reception Supervisor		<input type="checkbox"/> Clerical Director		<input type="checkbox"/> Traffic Control	
<input type="checkbox"/> Reception		<input type="checkbox"/> Clerical		<input type="checkbox"/> Security (Law Enforcement)	
<input type="checkbox"/> Triage		<input type="checkbox"/> Runner Supervisor		<input type="checkbox"/> Security Internal (Non-Sworn)	
<input type="checkbox"/> Registration Supervisor		<input type="checkbox"/> Runner		<input type="checkbox"/> Support Security (Public Works)	
<input type="checkbox"/> Registration		<input type="checkbox"/> Inventory Supervisor			
<input type="checkbox"/> Internal Registration		<input type="checkbox"/> Inventory			
<u>SPECIAL SKILLS:</u>					
<u>PREVIOUS EXPERIENCE:</u>					

Applicants may be notified by my office after submittal of this form for additional information and to determine participation in emergency management training. Thank you for your interest in the program.

Village President Frank J. Munao, Jr.