

# **Volunteer Emergency Support Team, Jackson County Emergency Management**



The Volunteer Emergency Support Team (VEST) is a group of volunteer leaders who assist Jackson County in making effective use of unaffiliated, "spontaneous" volunteers after a community disaster. VEST members may be asked to provide assistance with managing spontaneous volunteers and in standing up Volunteer Reception Centers.

## **Description:**

VEST members are citizens both young and old who will assist Jackson County in making effective use of unaffiliated, "spontaneous" volunteers in the event of an emergency. The VEST Team will help ensure that volunteers provide valuable services to Jackson County after community disasters -- and that their presence does not impede rescue and response activities.

Specific ways that VEST volunteers may be asked to help after a disaster include: (1) help Jackson County receive and respond to offers of volunteer help and/or donations; (2) assist in operating Volunteer Reception Centers if they are activated; (3) assist local nonprofit organizations in volunteer management or other administrative tasks so that they can maintain their services after a disaster has struck.

VEST will be utilizing social media for future opportunities of engagement, and to help create a positive volunteer opportunity for those involved; so there will be time for volunteers to take on leadership positions and to support overall program management.



12. List all skills you possess that would be of value to EMA work: \_\_\_\_\_

13. Do you speak a foreign language? If so, which? \_\_\_\_\_ Fluent? YES \_\_\_\_\_ NO \_\_\_\_\_

14. Do you have any specialized equipment? (4-wheel drive vehicle, snowmobile, etc.)

15. If you are a HAM RADIO OPERATOR please state your call signs \_\_\_\_\_

16. Referred by \_\_\_\_\_

*ALL QUESTIONS ON THE APPLICATION ON BOTH SIDES HAVE BEEN ANSWERED IN A TRUE AND CORRECT MANNER.*

**OATH REQUIRED BY EMERGENCY MANAGEMENT AGENCY PERSONNEL**

I do solemnly swear (or affirm) that I will support and defend and bear true faith and allegiance to the constitution of the United States of America and to the Constitution facilities thereof, both public and private, against all enemies, foreign and domestic; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter. And I do further swear (or affirm) that I do not advocate, nor am I, nor have I been a member of any political party or organization that advocates the overthrow of the Government of the United States or the State of Indiana by force or violence; and that during such time as I am affiliated with the Jackson County Emergency Management Agency, I will not advocate the overthrow of the Government of the United States or the State of Indiana by force or violence.

Date \_\_\_\_\_ Signature \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

Notary public \_\_\_\_\_

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**DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY**

Approved by  
Director \_\_\_\_\_ DATE \_\_\_\_\_

Approved by Division Manager \_\_\_\_\_ DATE \_\_\_\_\_

Membership Card Number \_\_\_\_\_ Issue Date \_\_\_\_\_