SAFECOM

ASSURING A SAFER AMERICA THROUGH EFFECTIVE PUBLIC SAFETY COMMUNICATIONS

SAFECOM At-Large Membership Application

Section A: Membership Criteria

Applicants must possess the following required criteria to be considered for SAFECOM membership:

☐ Practical experience with communications and interoperability and the desire to learn

☐ Currently employed (including volunteer status) or designated by a tribal, territorial, local, or state government *(at-large members)*

Applicants must also meet one or more of the following criteria to be a member of SAFECOM (Please check all that apply and specify in the appropriate section below):

☐ Represent a relevant discipline within the public safety community

☐ Currently serve on statewide and/or regional interoperability governing body or represent an association

☐ Possess expertise in a specific area relevant to the public safety community that provides a specific contribution to the SAFECOM program

Section B: Personal Information

Last	First		MI	Email
Home Address		City	ST	Zip	Preferred Phone	Alternate Phone
Organization			Title	

How did you hear about SAFECOM?

Referred by current SAFECOM Member? ☐ Yes ☐ No	Referred By:

Section C: Applicant Profile

Agency Category – Please select all that apply:

☐ Communications Center   ☐ Law Enforcement
☐ Emergency Management   ☐ Fire Service
☐ Emergency Medical Services   ☐ PSAP
☐ Government Agency   ☐ Other: _____

Job Classification – Please select all that apply:

☐ 9-1-1 Coordinator   ☐ Law Enforcement
☐ Emergency Management   ☐ Fire Service
☐ Engineer/Technician   ☐ Supervisor
☐ Information Systems   ☐ Telecommunicator/Dispatcher/ Administrator
☐ Manager
☐ Emerging Technologies   ☐ Training & Education Coordinator
☐ Emergency Medical Services   ☐ Statewide Interoperability Coordinator
☐ Wireless Communications   ☐ Transportation
☐ Public Works   ☐ Wildlands
☐ Policy   ☐ Grants
☐ Finance   ☐ Other:_____

Are you a member of any public safety associations? If so, please explain:

Section D: Elected Official

Are you formerly or currently serving as an Elected Official? ☐ Yes ☐ No (If "No," please skip to next section.)	Title

Level of Government

☐ Federal   ☐ State   ☐ County   ☐ Local   ☐ Territorial   ☐ Tribal   ☐ Other:_____

Section E: Tribal Representation

Are you a member of a Tribal Government? ☐ Yes ☐ No (If "No," please skip to next section.)	Tribal Name
Title	Location of Tribal Lands (State(s) included)

Section E: Work Experience

	Current or Most Recent	Prior	Prior
Employer			
Address			
City, ST, ZIP			
Name of Immediate Supervisor			
Supervisor Telephone/Email			
Dates of Employment	From To	From To	From To
Position/Job Title			
Reason for Leaving			
May We Contact?			

Section F: Education

Please indicate your educational experience, to include any trade/technical schools, university/college education, advanced degrees, etc.

Institution Name/Location	Degree/Certifications	Major/Program

List any applicable special skills, training or proficiencies.

Section G: Other Relevant Expertise

Please list any additional expertise not otherwise include on this application here (i.e., Highlight examples of your contributions/accomplishments to the public safety community):

☐ By checking this box, I acknowledge that I have read and understand the SAFECOM Member expectations and my agency agrees to support this activity [See SAFECOM Charter for member expectations]		
Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being selected or lead to my dismissal if selected. I also provide consent for former employers to be contacted regarding work records.	Signature	Date