

## Elk Grove Village Police Department



## **CERT Basic Training Registration Form**

Your Information: (Please print clearly)						
LAST NAME	FIRST NAME					MIDDLE INITIAL
STREET ADDRESS	CITY			STATE	ZIP CODE	
E-MAIL ADDRESS	HOME TELEPHONE			MOBILE TELEPHONE		
VOLID FAIRLOVED	WORK TELEBLIONE			IOD TITLE		
YOUR EMPLOYER	WORK TELEPHONE			JOB TITLE		
EMPLOYER ADDRESS	CITY			STATE ZIP CODE		
EMPLOTER ADDRESS				STATE	Zii GGBE	
LIST CURRENT OR PAST CIVIC / COMMUNITY ORGANIZATION AFFILIATION(S):						
WHY ARE YOU INTERESTED IN CERT?						
Have you ever been convicted of a felony?	Yes:		No:			
IF YES, PLEASE EXPLAIN:						
Do you have any physical limitations?	Yes:		No:			
IF YES, PLEASE DESCRIBE						
ACKNOWLEDGMENT: "The above information is, to the best of my knowledge, complete and accurate. I understand a background check may be performed."						
YOUR SIGNATURE			DATE			

Application is not valid without signature and all lines must be completed. All applicants accepted into the program must sign a Release of Liability Agreement and complete an Emergency Information Form. Elk Grove Village reserves the right to accept or reject any CERT application.