



Mailing Address:

9709 NE 83rd Court

Vancouver, WA 98662

Phone: 1-360-356-3761

info.calledtorescue@gmail.com

## Called To Rescue Awareness & Civilian Task Force Application

Date: \_\_\_\_\_

### Personal information

Full legal name \_\_\_\_\_

Male \_\_\_ Female \_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_\_

Any Alias/Maiden Names? \_\_\_\_\_

Current address: \_\_\_\_\_

Permanent address: \_\_\_\_\_

Mailing Address (If Different): \_\_\_\_\_

Telephone number: Home ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_

Email \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Passport # \_\_\_\_\_ Citizenship \_\_\_\_\_

Driver's License #/State \_\_\_\_\_

If Married, Spouse's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Children? Name(s) / Gender: \_\_\_\_\_

Emergency Contact/Relationship: \_\_\_\_\_

Do you have an FBI Background Check? YES \_\_\_ NO \_\_\_ If not, please note it is required you apply and we receive an official FBI background check before any involvement in Called To Rescue can occur (See "Note" on last page for link).

Have you ever been arrested/convicted of a felony? If so explain when/where/for what \_\_\_\_\_

Are you or have you ever been addicted to a substance of any kind? If so, what/where/when? \_\_\_\_\_

Have you ever been a victim of domestic violence? If so explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you a survivor of any form of human trafficking? If so, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any local or national clubs, associations and religious organizations that you belong to: \_\_\_\_\_  
\_\_\_\_\_

Have you served in the military? Y / N If so, from \_\_\_\_\_ to \_\_\_\_\_

Please list any specialized training you received in the military \_\_\_\_\_

Have you ever been treated for a mental or emotional condition? Y / N If "yes," Please Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any special physical needs or restrictions that you would like us to be aware of? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any medical conditions we need to be aware of? \_\_\_\_\_  
\_\_\_\_\_

What is your current job(s)? \_\_\_\_\_

Are you planning to stay with your job while partnering with CTR? \_\_\_\_\_

If not, why you are leaving? \_\_\_\_\_  
\_\_\_\_\_

Do you have a valid concealed carry handgun permit(s)? YES \_\_\_\_ NO \_\_\_\_

If so, a) In which states are you permitted to carry? \_\_\_\_\_  
\_\_\_\_\_

b) What weapon training programs have you completed? \_\_\_\_\_  
\_\_\_\_\_

**FOR CIVILIAN TASK FORCE APPLICANTS**

How did you hear about becoming a CTR Task Force Leader? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please tell us why you are interested in volunteering as a CTR Civilian Task Force Member/Leader with us: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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If married, Is your spouse aware of your interest in Called To Rescue and do they approve fully? \_\_\_\_\_

**REFERENCES**

**Professional Reference (Should be current employer. ie: your boss/supervisor/manager)**

Name \_\_\_\_\_

Company/organization \_\_\_\_\_

Relationship \_\_\_\_\_

How long have you worked for this person? \_\_\_\_\_

Office Address \_\_\_\_\_

Telephone number: Main (    ) \_\_\_\_\_ E-mail \_\_\_\_\_

Does this person know that we will be contacting him/her? Y / N

**Family Member Reference (should be an immediate family member)**

Name \_\_\_\_\_

Relationship \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

Address \_\_\_\_\_

Telephone number: Main (    ) \_\_\_\_\_ E-mail \_\_\_\_\_

Does this person know that we will be contacting him/her? Y / N

**Personal Reference #1 (should not be a family member)**

Name \_\_\_\_\_

Relationship \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

Address \_\_\_\_\_

Telephone number: Main (    ) \_\_\_\_\_ E-mail \_\_\_\_\_

Does this person know that we will be contacting him/her? Y / N

**Personal Reference #2 (should not be a family member)**

Name \_\_\_\_\_

Relationship \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

Address \_\_\_\_\_

Telephone number: Main (    ) \_\_\_\_\_ E-mail \_\_\_\_\_

Does this person know that we will be contacting him/her? Y / N

**STATEMENT OF UNDERSTANDING**

NAME \_\_\_\_\_

**PROHIBITED USE OF FIREARMS AND EXCESSIVE FORCE:**

In

no way, shape or form does Called To Rescue permit or encourage the use or draw of a personal firearm when involved in any operation or activity endorsed by Called To Rescue. We are not the ones that rescue the victim, but rather assist in the gathering of intelligence and are the eyes and ears on the streets to help locate missing persons with the supervision of law enforcement at all times. We do not encourage situations that place volunteers in a position to use excessive force or the use of personal firearms. Any violation in Called To Rescue's rules of operation and engagement will result in immediate discharge of involvement with Called To Rescue.

**HEALTH INSURANCE:**

I understand that it is my responsibility, while participating with Called To Rescue, to provide my own health insurance. In the event of sickness, injury or death, my family and I will assume any and all costs.

**WAIVER AND RELEASE OF LIABILITY:**

In consideration of Called To Rescue, based in Washington State, a non-profit corporation, organizing, arranging and permitting me to attend and participate in any event, I hereby waive all rights which I may have or which may accrue in the future against Called To Rescue and/or any Called To Rescue representative from and agree to indemnify and hold Called To Rescue and their representatives harmless from and against all liability from and all actions, damages, causes of action, suits, costs, losses, expenses, claims, demand, damages and judgments (collectively the "Losses and Claims"), which I, my spouse, family members, children, heirs, executors, administrators, successors and assignees ever had, now have or hereafter can, shall or may have resulting from or arising in connection with my travel to attendance, at or participation in Called To Rescue events.

I acknowledge that no promises, representations, or affirmations of fact were made to me by Called To Rescue or their representatives concerning the safety of the event, the security precautions taken in sponsoring the event, the relative safety or danger associated with traveling to the event or participating in any activity, academy, event or outing related to, associated with or connected in any way to event and affirm that I have read and understand the foregoing provisions of this waiver and release of my liability and accept the terms of this waiver and release of liability as a condition to my attendance at the event.

**Note: As part of the application process for Called To Rescue you must submit an FBI background check. Once the record check is completed you will need to submit the record to our office. To request an FBI background check go to <http://www.fbi.gov/about-us/cjis/background-checks> and follow the directions.**

**(SIGN AND DATE ON NEXT PAGE)**

**I have read the above Statement of Understand and the Release of Liability and agree with them.**

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

Print Full Legal Name \_\_\_\_\_ Date \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

Print Name: \_\_\_\_\_