



Federal Emergency Management Agency
URBAN SEARCH AND RESCUE TASK FORCE (MA-TF1)
13 Morningside Drive, Beverly, MA 01915
Telephone: (978) 922-5680
FAX: (978) 921-6074



MA-TF1 FEMA USAR Team Application

Applicant Information

Name (Last, First, MI): _____

Address: _____

City/Town: _____ State: _____ ZIP: _____

DOB: _____ SSN: _____

Position/Assignment Requested: _____

Notification Information

Home Phone: _____

Work Phone: _____

Pager: _____ PIN #: _____ Service Provider: _____

FAX: _____

Cell Phone: _____ Service Provider: _____

Nextel ID: _____ E-mail Address: _____

Person to Notify in Emergency

Name: _____ Relationship: _____

Address: _____

City/Town: _____ State: _____ ZIP: _____

Home Phone: _____ Work Phone: _____

Employer Information

Employer: _____ Position: _____

Employer Address: _____

City/Town: _____ State: _____ ZIP: _____

Supervisor: _____ Title: _____

Phone: _____ Fax: _____

Medical Information

Physical disabilities/limitations: _____

Physical Conditions: _____ Blood Type: _____

Height: _____ Weight: _____

Medications: _____

Allergies: _____

Immunizations: (*Documentation required*)

Hep-B: _____	1 st dose	MMR: _____	
_____	2 nd dose	Tetanus: _____	
_____	3 rd dose	Polio: _____	
_____	Titer	Hep-A: _____	1 st dose
_____	Titer Results	_____	2 nd dose

Special Qualifications

Medical Qualifications: MD DO RN EMT-P C I D M B A Other: _____

State EMT #: _____ State of Registry: _____ Expiration: _____

National EMT #: _____ Expiration: _____

Medical License #: _____ State: _____ Expiration: _____

Nursing License #: _____ State: _____ Expiration: _____

CPR Expiration: _____ AHA RC

Medical First Responder Training: _____

Special Equipment Licenses: _____

Amateur/Commercial Radio License: (call) _____ (class) _____

Miscellaneous

U.S. Passport #: _____ Expiration: _____

Drivers License #: _____ State: _____ Expiration: _____ Class: _____

CDL: yes no DOT Card: yes no Expiration: _____

Religion: _____

Waist: _____ Inseam: _____ Chest: _____ Hat: _____ Gloves: _____

USAR Qualifications

(Briefly describe level of training and attach documentation)

Hazmat First Responder Awareness: _____

Basic Firefighting (NFPA 1001): _____

Rope Rescue: _____

Confined Space Rescue: _____

Shoring & Stabilizing: _____

Use of Rescue Tools (list): _____

Search Operations: _____

Canine Operations: _____

Construction Techniques: _____

Construction Equipment Operation (list): _____

Rigging, Welding, Cutting: _____

Incident Command System (ICS): _____

CISD Training: _____

Supervisory Experience: _____

Military Experience: _____

Military Aircraft Experience: _____

Foreign Language: _____

Other: _____

References:

Name: _____ Title: _____

Address: _____

City/Town: _____ State: _____ ZIP: _____

Phone: _____

Name: _____ Title: _____

Address: _____

City/Town: _____ State: _____ ZIP: _____

Phone: _____

Signature: _____ Date: _____

Reviewer: _____ Date: _____