



# Federal Emergency Management Agency URBAN SEARCH AND RESCUE TASK FORCE 1 (MA-TF1)

43 Airport Road, Beverly MA 01915  
(978) 922-5680 Fax: (978) 921-6074



January 1, 2020

Thank you for your interest in applying for MA-TF1. Please use this letter as a checklist to ensure your application packet is complete. The forms listed below are accessible/fillable on our website. Complete, download, print and sign the forms and mail with other inclusions listed below along with this checklist to the address above ATTN: Ann Powers. **Please do not use staples or paper clips or print forms double sided.** Packets may also be hand delivered.

- |  |  |
|--|--|
| Application  | Activation Reimbursement                   |
| Resume   | W9 from Employer if Activ. Reimb thru emp. |
| MOU signed by employer                               | Code of Conduct                            |
| Personal Service Agreement                           | Commitment Declaration Page                |
| Responder Information Sheet                          | Beneficiary Form                           |
| Data Transmittal Sheet                               | Policy Handbook Acknowledgement            |
| W9 Form (Page 1 only)                                | Respiratory Medical Evaluation             |
| Medical History Form (including physician's portion) | Questionnaire CORI Request Form            |

Include completion certificates (no transcripts) for the following courses:

- |         |         |         |          |        |                   |
|---------|---------|---------|----------|--------|-------------------|
| ICS 100 | ICS 200 | ICS 700 | ICS 800b | AWR160 | IS-33 FEMA Ethics |
|---------|---------|---------|----------|--------|-------------------|

Include a clear photocopy of the following licenses/training certificates. (ONE document per page please)

- |   |                           |                                     |
|---|---------------------------|-------------------------------------|
| Driver's License                          | CDL/DOT (if applicable)   | EMT                                 |
| CPR                                       | MD/RN/DEA (if applicable) | Passport (not required but desired) |
| Engineering Certificate (Structures only) |                           |                                     |

Copies of any additional relevant certifications or training certificates applicable to position applying for.

Include documentation from administering agency for immunizations listed below that includes your name, administering agency and date of vaccine. If documentation is from a titer, ensure it is clear whether you are or are NOT immune. (If you have not had any hepatitis vaccines, you may want to wait to ensure your application is selected before getting immunizations.)

- |   |   |
|---|---|
| Tetanus (must be within past 10 years)                  | MMR (or titer date and results)                         |
| Polio (or titer date and results)                       | Hepatitis A – 2 shot series (or titer date and results) |
| Hepatitis B – 3 shot series (or titer date and results) |   |

You will receive an email when your packet is received. If you do not receive an email within a reasonable amount of time, please email Ann at [apowers@matf.org](mailto:apowers@matf.org). Your information will be forwarded to the manager of the discipline you have applied for and you will be notified via email if you will be invited to attend an orientation session. Should you be chosen to continue after the orientation, it is mandatory to attend multiple recruit training sessions per schedule. **If you are unable to attend ALL sessions, your ability to reach a deployable status will be substantially delayed.**

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