Connecticut Fire Service Statewide Disaster Response Plan Coordinator Application

This application is to be completed by any emergency service personnel who wish to **volunteer** to actively fill a role in this plan. Provide all requested information and complete a brief narrative of not more that 250 words explaining your qualifications for the position applied for based on attached position descriptions. You may apply for more than one position on an application. Forward completed applications to Chief Edward Richards, Enfield Fire Department, 200 Phoenix Ave, Enfield 06082. Fax 860 745-7114.

Name & Rank:						
Mailing Address: _	Street Address	City	Zip			
Phone Numbers:			Pager/Cellular	Pager/Cellular		
			_			
Department Affiliation:				Supervisor's name		
Circle position appl		County you will repres	ent			
Regional Coordina	ator or Alternate		Count	y Coordinator or Alt	ernate	
Information, EM	S Liaison, Opera	tions, Planning,	Logistics, Financ	ce, Communications	, Liaison	
Narrative:						