



**Wyoming Office of Homeland Security
Radio Amateur Civil Emergency Services (RACES)
Operator and Station Certification**



**Emergency Communications Ham
Operators_Jackson Hole (ECHO_JH)**

Name: _____ Amateur Call: _____ County of Residence: _____

Governmental Certifying Civil Defense Organization (CCDO): _____

License Class: T T+ G A E Expiration Date: Month _____ Day _____ Year _____

Personal Information:

Birth Date: _____
Mailing Address: _____
Street Address: _____
City: _____ State: _____ ZIP: _____
E-mail Address: _____
Home Phone: _____ Cell Phone: _____

Employment Information:

Occupation: _____
Employer: _____
Mailing Address: _____
Street Address: _____
City: _____ State: _____ ZIP: _____
Work Phone: _____

Formal certified training: Certification documentation such as a certificate or FEMA transcript should accompany the application or as agreed upon with the CCDO. You should notify your CCDO when you update your training. IS-100, IS-200, and IS-700 are required within the first year of certification.

- IS-100 IS-200 IS-300 IS-700 IS-702 IS-800 IS-317
 Comm Unit Leader AWR-160 First Responder Card CERT Certified
 ARRL Emergency Communications Courses: EC-001 EC-002 EC-003
 CPR First Aid *Other relevant training:* _____

Affiliation Information: ARES MARS (Call) _____ Skywarn CAP (Call): _____
 CERT Red Cross Salvation Army VOAD (list all) _____

Personal Assessment: I believe I am physically capable of working in the following environments:
 Office EOC Urban Disaster Site Disaster Shelter Improved Field Site (Fire Camp)
 Unimproved Field Site Pack tested Most recent test date _____

Skills Information: Antennas Towers Computer Tech Radio Tech Electronic Tech
 Electrician Welder Carpenter Truck Driver ARES Net Manager
 Other relevant skills: _____

Equipment Information: HF HF Mobile HF Data (Modes): _____
 2-Meter Mobile 2-Meter Handheld VHF/UHF Packet ARES OES ARES ORS
 Alternative Power Generator (KW): _____

*****Enclose a Copy of Your Amateur Radio License with Application*****

I agree to abide by and obey all orders and directives of the Federal Communications Commission as they apply to the Radio Amateur Civil Emergency Service and any authorization issued in accordance with this application shall be issued with the express understanding it is subject to revocation or cancellation at any time. I have read and agree to accompanying instructions dated 19 Jun 2009.

Signature of Applicant

Date

CCDO Certification: I hereby certify the applicant is a member of the CCDO named below and has satisfied all requirements for participation in RACES for the area served by that CCDO.

Signature of CCDO Officer

Date

WSRO Date

Privacy Information

Detailed individual information will only be disclosed to the Wyoming Office of Homeland Security (WOHS), County Coordinators, and Wyoming RACES members. Only your name and call sign may be released publicly. You should not provide optional information that you do not want released accordingly. Any information may be used anonymously to report Wyoming RACES or CCDO as a whole.

Instructions

1. **Membership Eligibility:** All amateur radio operators eighteen years and older are eligible for membership in the Wyoming RACES program. Club and military stations are not eligible for membership.
2. **General:** Information in *italic type* is optional. The CCDO may require more or less information than is on this form. You should discuss any concerns with your CCDO.
3. **Personal Information:** Providing a street address (when different from your mailing address) provides a means to locate you when normal communications are unavailable. Providing your cell phone number will help us quickly locate you in the event of an emergency. Providing your e-mail address will allow us to communicate with you in a more timely and cost-effective manner.
4. **Employment Information:** Providing this optional information will assist in contacting you in the event of an emergency or in locating persons with specific skills. If you are retired, listing your former occupation would be of assistance.
5. **Formal Training:** While this does not capture on-the-job training, providing certified training information will allow us to assess your suitability for disaster and field assignments. Other training might include firefighter, emergency medical technician, or computer certifications.
6. **Affiliation Information:** Providing this information gives the RACES program a point-of-contact in other organizations and alleviates duplicate accounting of your service.
7. **Personal Assessment:** Providing this information will assist in assigning you to an appropriate location in the event of a widespread emergency.
8. **Skills Information:** Providing this optional information assists us in locating persons with special skills. Please mark any skills you can perform with little or no supervision. Other skills might include teacher, cook, heavy equipment operator, or plumber.
9. **Equipment Information:** Providing this optional information enables us to locate persons with equipment for specific assignments. Where blanks are provided (HF Data, for example) please provide specific information on the modes you are proficient in, such as PACTOR, PSK31, Packet, or APRS. Alternate power includes solar, wind, or battery powered operation capability.
10. **The Wyoming State RACES Officer's initials:** Initials only note that the form is complete or as agreed otherwise, signed by the proper CCDO, and entered into the database.
11. **Background checks** – All RACES members are subject to background checks. Now or in the future, some CCDOs may require financial checks for certification. Before financial checks, the organization requiring the check will inform you and may request additional information. At that time you may discontinue your membership without repercussion if you will not authorize a financial check.
12. **Disposition:** Give completed form to your CCDO
13. **Questions:** Ask your CCDO or the Wyoming State RACES Officer any questions you may have.