**King County Regional**

**Emergency Management Assistance Team (EMAT) Application**

**INSTRUCTIONS:** *Complete form electronically, print, sign, and have agency head and emergency manager review and complete letter of endorsement. Submit both application and letter, and any questions to* [*HLS.Region6@kingcounty.gov*](mailto:HLS.Region6@kingcounty.gov)*.*

Applicant Name:       Agency:

Mailing Address:

Email:       Secondary Email:

Work Phone:       Home Phone:

Cell Phone:       Cell Phone Carrier:

EOC/ECC Qualified Positions (check all that apply):

Team Leader  Strategic Advisory Specialist  IMT Liaison

Plans Section Chief  Plans Support

Logistics Section Chief  Logistics Support

Operations Section Chief  Operations Support

Finance/Admin Section Chief  Finance/Admin Support

Public Information Lead  PIO Support

EOC/ECC Qualifications and Relevant Experience:

ICS Classes Completed (required):

100  200  700  800  300  400

Additional relevant classes completed (e.g., position specific, PIO, IMT/EOC, social media, etc.):

I understand that my involvement in the King County Regional EMAT is voluntary, on an annual basis, and based on committee selection. I commit to attend training, to maintain my availability and contact information and state-of-readiness, and to respond to calls for activation. I further understand that there is not the expectation that I deploy whenever called upon, but consistent lack of engagement may preclude further involvement. My agency and supervisor support my involvement on an availability basis as a mutual aid resource.

Agency Head/Emergency Manager letter of endorsement attached

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

ADMINISTRATION SECTION

Date Received \_\_\_\_\_\_ Status\_\_\_\_\_\_ Processed Date \_\_\_\_\_\_\_\_  SharePoint access  Email list  KC Alert list