

CONNECTICUT STATE ANIMAL REPOSE TEAM
INDIVIDUAL DATA FORM

Personal Data Survey

Date Completed: _____

Basic Information		
Name		
Mailing Address		
City	State	Zip
This address is	Home <input checked="" type="checkbox"/>	Work <input type="checkbox"/>
Home Phone	Home Fax	
Cell Phone	Pager	
Work Phone	Work Fax	
Preferred Email Address		
Organizational Affiliations		
Please ensure an <i>Organization Resource Data Sheet</i> is on file if your organization is willing to participate in animal emergency relief programs		
Primary Organization		
Position		
Work Phone	Work Fax	
Work Email		
Comments		
Secondary Organization		
Position		
Work Phone	Work Fax	
Work Email		
Comments		
Qualifications and Experience		
Please list advanced degrees, special skills and training certifications:		
Please list relevant experience:		
<i>Please also attach additional information as needed and a description of your potential availability for extended or out-of-state deployment</i>		

CONNECTICUT STATE ANIMAL RESPONSE TEAM
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Individual Area of Interest

Please check any of the following that may match your interests or availabilities:

- I am interested in working with my local Regional Animal Response Team (R-ART) or local voluntary animal welfare agencies please help me identify appropriate contacts.
- I am a veterinary professional that is interested in becoming involved in local or state preparedness or response efforts
- I am a veterinarian or veterinary technician interested in assisting nationally and would be able to commit to a deployment of two weeks or more.
- I am an animal control officer or other animal professional who is a government employee and interested in assisting out of state for at least a 16 day period.
- I am an animal care, animal sheltering, or livestock professional and am interested in helping through an out-of-state deployment.
- I am an animal care, animal sheltering, or livestock professional and willing to assist in animal emergency programs within Connecticut.
- I am a volunteer experienced in animal issues and willing to assist in animal emergency programs.
- I am a volunteer who would like to assist animal emergency issues through a support roles, such as education, response support roles, and funding/resource development.
- Other: _____

Connecticut SART Field Operations Team

The CTSART Field Operations team is a program that builds response capacity to assist local communities and other states in the area of :

1. Evacuation, search & recovery, and technical animal rescue
2. Animal sheltering
3. Veterinary care
4. Wildlife response issues
5. Biological, chemical, or radiological response issues

While one team is initially being formed, additional regional teams could be formed in the future.

Please send me more information on the SART Field Operations Team.

I hereby authorize the Connecticut SART program of the Connecticut Veterinary Medical Foundation (CVMF) to share this information with the following partner agencies solely for purposes related to emergency preparedness and response.

- Connecticut Department of Emergency Management & Homeland Security
- Connecticut Department of Agriculture
- Connecticut Department of Public Health
- University of Connecticut
- Connecticut Veterinary Medical Association
- Local emergency management agencies and Regional Animal Response Teams

I understand that I may receive information on other CVMF programs supporting animal health and welfare issues as well.

X _____
Signed Date