

Keystone Crisis Intervention Team (KCIT)
Application Form

I am NOVA trained and am interested in joining KCIT.

Personal Information:

Name: _____ Home Phone: _____

Cell Phone #: _____ Pager: _____

Home Address: _____
Street

City	County	State	Zip
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Email Address: _____

Cultural/Ethnic Identification: _____ Religious Affiliation: _____

Employment Information:

Agency/Organization: _____ Title: _____

Work Address: _____
Street

City	County	State	Zip
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Work Phone: _____ Fax Number: _____

Does your employer know you have volunteered and may be called to assist in a crisis? No Yes

Will your employer support you (i.e. with leave time) if you are called to assist in a crisis? No Yes

Emergency Contact:

Name: _____ Home Phone: _____

Relationship: _____ Work Phone: _____

Alternate Phone: _____

(over)

Please answer the following questions

Basic NOVA training – Date: _____ Location: _____

Advanced NOVA training – Date: _____ Location: _____

Please describe any response experience and your role (i.e.- clergy, team leader, counselor, teacher, victim service professional, media liaison, member of the medical profession):

Which of the above roles are you qualified for in any future crisis interventions?

How far can you travel (within the state and out of the state)? _____

Do you speak a language other than English? No Yes – which? _____

Please describe any special skills you have which may assist others in the event of a crisis:

Please describe any experience you have working with special populations:

References:

Please include two letters of support with this form (at least one should be from an employer) and a copy of your NOVA certificate.

Please return form to:
KCIT Project Coordinator
Network of Victim Assistance
2370 York Road, Suite B1
Jamison, PA 18929