## PAGE 2 - APPLICANT INFORMATION

Arizona Department of Emergency and Military Affairs Adjunct Instructor Application

## \*\* REQUIRED FOR ALL APPLICANTS \*\*

Personal Information (please check your preferred contact method)								
First Name		Last Name			EIN (DEMA Use Only)			
Home Street Address			City			State	Postal Code	
Home Phone	Cell Phone □	Fa	ax	Personal Email (optic		onal): 🗌	1	
Employment Information (please check your preferred contact method)								
Agency			Position/Title					
Agency Street Address			City			State	Postal Code	
Office Phone	Cell Phone □	Fa	ax	Agency Email:				
Affiliations. Do you have an Emergency Services Agency affiliation?   No   If "Yes", check below:								
☐ I am currently employed by an Emergency Services Agency (same as above, skip to next question) ☐ I was formerly employed by an Emergency Services Agency (list agency below) ☐ I am/was not employed by an Emergency Services Agency, but have an affiliation (list agency below)								
Organization:				١	Your Position/Title/Role:			
Do you have a Tribal affiliation? ☐ Yes │ ☐ No								
If "Yes", name of Tribe:				Position/Title/Role/Relationship:				
Do you offer training or consulting services through a private business?   Yes   No								
If "Yes", name of company:								
Objective. What is your motivation for becoming an Adjunct Instructor with our division?								
☐ Local Agency Adjunct Instructor. Provides DEMA/FEMA sponsored training within their own agency.								
☐ Full Adjunct Instructor. Provides FEMA training throughout Arizona as required by DEMA.								
NOTE: Should also	apply as <i>Local A</i> g	gend	y Adjunct Instr	ructors	if teachi	ng for t	heir agency	
Your agency POC that has asked you to instruct:			eir phone number:	The	Their email address:			
Other reason for wanting to join our instructor cadre:  BRIEF reason. You may give a more detailed reason in your resume/bio:								