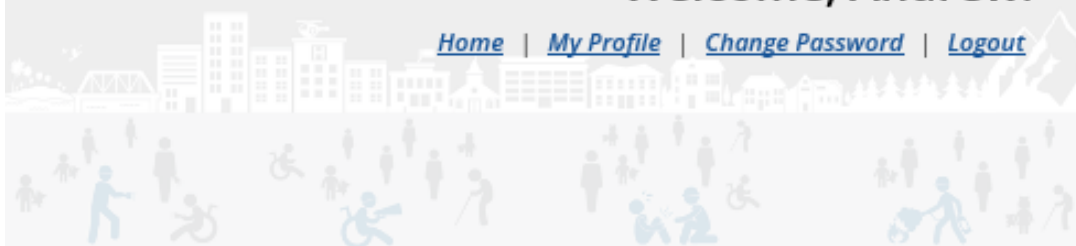


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Register

START A CERT PROGRAM

START A CITIZEN CORPS COUNCIL



Manage

UPDATE YOUR PROGRAM(S)

COMPLETE SURVEYS



Connect

SEARCH NEARBY CERTS/COUNCILS

CONTACT DIRECTORY

Welcome to the FEMA Citizen Responder Programs Registration Site - where you can connect to programs in your area or start a new program.

Learn more about the impact of [Community Emergency Response Teams \(CERT\)](#).

Learn more about the power of community and the [Citizen Corps Council](#) program.

Please [Contact Us](#) if you need help.

Ready.gov

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Register a New CERT Program

PAPERWORK BURDEN DISCLOSURE NOTICE FEMA Form 008-0-25

Public reporting burden for this data collection is estimated to average .5 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472-3100, Paperwork Reduction Project (1660-0098) NOTE: Do not send your completed form to this address.

Are you ready to register a new CERT program? Check out the criteria:

- Have you been or will you be sponsored by a local emergency response organization and endorsed by the local Citizen Corps Council (if one exists in your community)?**
- Are you willing to conduct at least one CERT Basic Training Course and one formal CERT exercise once a year?**
- You will be the primary Point of Contact (POC) or you will designate someone else as the POC.**

20%

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Register a New Citizen Corps Council

PAPERWORK BURDEN DISCLOSURE NOTICE FEMA Form 008-0-25

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Register a new Citizen Corps Council to help build disaster preparedness within your community.

Have you been or will you be sponsored by a local emergency response organization?

20%

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Start Your CERT Program Profile

Program Name*	<input type="text"/>
Tribal Community Program	<input type="text" value="No"/>
Tribe	<input type="text" value="--None--"/>
Select State or Territory	<input type="text" value="--None--"/>
Select County or Local Program*	<input type="text" value="--None--"/>
County/Zip Code*	<input type="text"/> <input type="button" value="Search"/>

All fields marked with a red asterisk (*) are required.

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Start Your Citizen Corps Council Profile

Program Name*	<input type="text"/>
Tribal Community Program	<input type="text" value="No"/>
Tribe	<input type="text" value="--None--"/>
Select State or Territory	<input type="text" value="--None--"/>
Select County or Local Program*	<input type="text" value="--None--"/>
County/Zip Code*	<input type="text"/> <input type="button" value="Search"/>

All fields marked with a red asterisk (*) are required.

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Establish a Point of Contact

The Point of Contact will have their information in the searchable CERT directory.

Click here if you are the Point of Contact.

First Name*	<input type="text"/>	MI	<input type="text"/>
Last Name*	<input type="text"/>		
Title	<input type="text"/>		
Organization*	<input type="text"/>		
Street Address*	<input type="text"/>		
City*	<input type="text"/>		
State/Territory*	<input type="text" value="--None--"/>		
Zip Code*	<input type="text"/>		
Country*	<input type="text" value="United States"/>		
Phone Number*	<input type="text"/>		
Fax	<input type="text"/>		
Email*	<input type="text"/>		

Establish a Point of Contact

The Point of Contact will have their information in our searchable Citizen Corps Council directory.

Click here if you are the Point of Contact.

First Name* **MI**

Last Name*

Title

Organization*

Street Address*

City*

State/Territory*

Zip Code*

Country*

Phone Number*

Fax

Email*

All fields marked with a red asterisk (*) are required.

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Enter Your Program's Information

The information you enter will be publicly available in the searchable CERT directory.

Populate from Contact Information.

CERT Program Name*	<input type="text" value="dfdsdf"/>
Sponsoring Organization*	<input type="text"/>
CERT Program Street Address*	<input type="text"/>
City*	<input type="text"/>
State/Territory*	<input type="text" value="--None--"/>
Zip Code*	<input type="text"/>
Country*	<input type="text" value="United States"/>
Phone Number*	<input type="text"/>
Fax	<input type="text"/>
CERT Website, If applicable	<input type="text"/>
Social Media Site, If applicable	<input type="text"/>
2nd Social Media Site, If applicable	<input type="text"/>

All fields marked with a red asterisk (*) are required.

Complete Your Citizen Corps Council Profile

The Point of Contact will have their information in our searchable Citizen Corps Council directory.

Populate from Contact Information.

Council Program Name*	<input type="text" value="fjdje"/>
Sponsoring Organization*	<input type="text"/>
Council Program Street Address*	<input type="text"/>
City*	<input type="text"/>
State/Territory*	<input type="text" value="--None--"/>
Zip Code*	<input type="text"/>
Country*	<input type="text" value="United States"/>
Phone Number*	<input type="text"/>
Fax	<input type="text"/>
Council Website, If applicable	<input type="text"/>
Social Media Site, If applicable	<input type="text"/>
2nd Social Media Site, If applicable	<input type="text"/>

All fields marked with a red asterisk (*) are required.

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Enter Your Sponsoring Organization's Information

Your sponsoring official may be the head of the sponsoring organization, or your local fire chief, police chief, sheriff, community emergency manager, or other official.

Only the sponsoring organization's name will be available publicly through the searchable CERT directory.

Sponsoring Organization

First Name*	<input type="text"/>	MI	<input type="text"/>
Last Name*	<input type="text"/>		
Title	<input type="text"/>		
Organization*	<input type="text"/>		
Street Address*	<input type="text"/>		
City*	<input type="text"/>		
State/Territory*	<input type="text" value="--None--"/>		
Zip Code*	<input type="text"/>		
Country*	<input type="text" value="United States"/>		
Email*	<input type="text"/>		
Re-enter Email*	<input type="text"/>		

All fields marked with a red asterisk (*) are required.

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Last Name*	<input type="text"/>		
Title	<input type="text"/>		
Organization*	<input type="text"/>		
Street Address*	<input type="text"/>		
City*	<input type="text"/>		
State/Territory*	<input type="text" value="--None--"/>		
Zip Code*	<input type="text"/>		
Country*	<input type="text" value="United States"/>		
Email*	<input type="text"/>		
Re-enter Email*	<input type="text"/>		

All fields marked with a red asterisk (*) are required.

100%

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Annual CERT Survey:

This survey must be completed by all CERT programs by December 31st each year.

Please update this information when you complete a new class, course, or exercise.

Read each question carefully and select all responses that apply. Complete all questions on a page and then click "Continue" to navigate to the next page. You can use the "Back" button to return to previous pages. Once all pages have been completed, click "Continue to Submit," to submit your responses and return to the Manage page.

Program Information

1. Survey respondent (your name) program state:

3. Sponsoring organization: program zip code

5. Name of sponsor Point of Contact

6. Type of sponsoring organization:

- Fire Department
- Law Enforcement
- EMS
- State
- Tribal
- Territorial
- County
- City
- Other

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Annual CERT Survey:

7. Name of sponsoring organization POC: _____

8. Name of sponsoring organization: _____

9. Does your program support more than one team? (a CERT program may cover a jurisdiction or geographic area that can support separate teams in different communities, for example a county level program could have teams for different cities or neighborhoods as well as Teen CERT teams in schools)

Yes___ No___ If yes, How many?_____

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Annual CERT Survey:

10. Program emphasis

- General/Community
- Teen
- Campus
- Workplace
- Other

11. Community served

- State
- City
- County
- Tribal
- Territorial
- Neighborhood
- High school
- University
- Faith-based organization
- Workplace
- Military
- Other

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Annual CERT Survey:

12. Approximate Number of Active Volunteers (Participation, outreach, response, etc. in the last year)

13. Estimated service population (population living within program service area)

14. How many CERT instructors do you have available?

15. Describe the professional experience of CERT instructors (Fire/EMS, Law Enforcement, Volunteer, etc.)

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Annual CERT Survey:

Training

1. During the last calendar year, how many times did your program conduct the CERT Basic Training course?
2. During the last calendar year, approximately how many volunteers graduated from the CERT Basic Training course?
3. Does your program offer training to the community? Select all that apply.
 - General public
 - Neighborhood groups
 - Businesses
 - Government groups (e.g., local or state)
 - Faith-based organizations
 - Teens/youth
 - Colleges and universities
 - People with disabilities
 - Military groups
 - Other

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Annual CERT Survey:

4. Does your program offer CERT members training in addition to the CERT Basic course?

Select all that apply.

- CERT Animal Response I
- CERT Animal Response II
- Amateur Radio Operation
- Other animals in emergencies training
- Community coalition building
- Volunteer management
- Cardio-pulmonary resuscitation (CPR)
- Automatic external defibrillator (AED)
- Additional damage assessment
- Decontamination
- First aid
- Additional incident command system
- Additional national incident management system
- Shelter operations/management
- Additional search and rescue
- Other _____

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Annual CERT Survey:

Exercises

1. During the past year, in how many exercises did your program participate?

2. During the past year, how many volunteers participated in program exercises?

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Annual CERT Survey:

CERT in Action

1. How many times has your program deployed in the last year?

2. What was the nature of the event to which your program responded? (Select all that apply)
 - Hurricane
 - Earthquake
 - Avalanche
 - Flood
 - Landslide
 - Fire
 - Wildfire
 - Tornado
 - Volcano
 - Tsunami
 - Winter storm
 - Other

3. Did your program deploy outside of its jurisdictional boundaries? (Yes No
 - o Where did you go?

 - o How long was the deployment?

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Annual CERT Survey:

4. Approximately how many volunteers deployed in the last year?
5. Approximately how many hours were volunteered in *deployment* in the last year?
6. What activities has your program conducted in emergencies?
- Sheltering operations
 - Search and rescue
 - Sandbagging
 - Command post support
 - Disaster medical operations
 - Animal rescue
 - Communications support
 - Other
7. Approximately how many hours were volunteered in *preparedness activities* in the last year?
8. What activities has your program conducted in non-emergencies? (Select all that apply)
- drills
 - exercises
 - training
 - community outreach
 - other

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Annual CERT Survey:

9. What activities has your program conducted in non-emergencies? (Select all that apply)

- exercises with emergency services
- risk mitigation assessments or activities (fire prevention, erosion control, etc)
- flood insurance awareness and outreach
- financial preparedness outreach
- You Are the Help Until Help Arrives
- AED training
- CPR training
- Stop the Bleed
- Other _____

10. What sort of community outreach activities has your program conducted

- distributing preparedness information
- speaking with others about preparation (canvassing)
- speaking with others about preparation (booth/table events)
- hosting preparedness meetings or training
- facilitate developing household emergency plans
- stocking supplies individually or at a community level
- encouraging non-members to take part in a drill or exercise to practice response
- financial preparedness activities or outreach

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Annual CERT Survey:

Funding

1. Please estimate the percent of funding your CERT receives from the following sources

State _____%
Tribal _____%
Territorial _____%
Local _____%
Private _____%
Fundraising _____%
Other _____%

2. Please check the box corresponding to your CERT Program approximate annual budget

- \$2,499 and below
- \$2,000-\$4,999
- \$5,000-\$9,999
- \$10,000-\$19,999
- \$20,000-\$29,999
- \$30,000-\$49,999
- \$50,000-\$99,999
- \$100,000+

3. Is your program registered as a 501(c)3 non-profit organization? Yes _____ No _____