Annex D3: IEC/R Classifier Application Form

Personal Profile

1. Title: 
2. Name: 
3. Contact details:  
   a. Tel: 
   b. Email  
4. Current Organisation and Position:  
   a. Organisation: 
   b. Position:  
5. Relevant USAR Operational Experience in the last 8 years in the following fields:  
   a. Management  
   b. Logistics  
   c. Search  
   d. Rescue  
   e. Medical  
6. Previous IEC/R experience (please specify): 


7. International Experience:  
   a. Previous mentoring experience: 


b. INSARAG Training  
   i. INSARAG Awareness Training YES/NO Date: 
   ii. UNDAC Induction Course YES/NO Date: 
   iii. UC Training Course YES/NO Date: 
   iv. Earthquake Response Exercise YES/NO Date: 
   v. INSARAG IEC/R Team Leader YES/NO Date:  
      and Mentor Course  

c. INSARAG Meetings:  
   i. USAR Team Leaders YES/NO Date:  
   ii. INSARAG Regional Meetings YES/NO Date:  
   iii. INSARAG Steering Group YES/NO Date:  
   iv. INSARAG Working Groups YES/NO Date:  
   v. After Action Meetings YES/NO Date:  
   vi. Other:  

Please attach photo
d. INSARAG USAR Capacity Assessment Missions/Capacity Building Projects
   YES / NO  Date:
   Country:

f. USAR Deployments

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
<th>Organisation</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Applying For:
1. IEC/R Team Leader  YES/NO
2. Management Classifier  YES/NO
3. Logistics Classifier  YES/NO
4. Search Classifier  YES/NO
5. Rescue Classifier  YES/NO
6. Medical Classifier  YES/NO

Sponsoring Agency  ____________________

INSARAG Policy Focal Point  ____________________

Name:  ____________________

Email:  ____________________

Phone:  ____________________

Operations Focal Point Signature:  ____________________

Applicant Signature:  ____________________

Note: By endorsing this application, the above mention Operations Focal Point attests the applicant will be made available and financially supported to the INSARAG Secretariat to function in the abovementioned capacity.

Kindly complete the form and send electronically to the INSARAG Secretariat, at insarag@un.org