

Iowa CERT Support Committee Basic Training Instructor Course Application / Registration Checklist

This revision shall supersede all previous versions of this document.

Last Name:		First Name:		Date:	Date:	
Sponsoring Agency Info	ormation					
Sponsoring Agency:			Sponsoring Age	Sponsoring Agency Email:		
Contact Last Name:	Contact Fi	Contact First Name:		Sponsoring Agency Phone Number:		
CERT Basic Training Ins Check Yes / No if you and sponsor backgrou	have complete	d the following	trainings and the d	ate. Include a copy of them.	e class certificates	
Description				Completed	Date	
CERT Basic Training				☐ Yes ☐ No		
IS-100 Introduction to Ir	ncident Comma	☐ Yes ☐ No				
IS-200 ICS for Single Res	ources and Initi	☐ Yes ☐ No				
IS-700 An Introduction to the National Incident Management System				☐ Yes ☐ No		
IS-315 CERT and the Incident Command System				☐ Yes ☐ No		
IS-317 Introduction to CERT				☐ Yes ☐ No		
Completed and passed s	sponsoring ager	icy background	check?	☐ Yes ☐ No		
Currently member of a (List Position:	- 100 - 110		
Currently an instructor f						
Student Signature I attest that all informatio	on provided is tr	rue and accurat	e to the best of my	knowledge. Any false sta	atement may be	
grounds for denial of my	registration for	this course.				
Name:			Date:			
Submit completed forn completed forn	-		-	-		
For Office Use						
All Certificates Received?	☐ Yes ☐ No	Verified with Sc	oonsor? \square Yes	No Registration Approv	red? □ Yes □ No	

Approval and Revision History

Approved By	Rev	Description
CERT Committee 11-07-2022	-	Initial Release