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| UNIT LEADER CANDIDATE (completed by recommending person) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last |  | | | | | | | | | | | First | | |  | | | | | | | | | Middle | | | | |  | | | | | |
| Street |  | | | | | | | | | | | City | | |  | | | | | | | | | ST | | | |  | | | | | Zip |  |
| Mailing |  | | | | | | | | | | | City | | |  | | | | | | | | | ST | | | |  | | | | | Zip |  |
| Email | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cell Phone | |  | | | | | | | | | | | | | | Home Phone | | | |  | | | | | | | | | | | | | | |
| Church | |  | | | | | | | | | | | | | | Location | | | |  | | | | | | | | | | | | | | |
| Preferred Specialty | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Expiration Date of Badge | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RECOMMENDING PERSON (completed by recommending person) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last |  | | | | | | | | | | | | First | |  | | | | | | | | Middle | | | | | |  | | | | | |
| Email |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cell Phone | | |  | | | | | | | | | | | | | | Home Phone | | | | |  | | | | | | | | | | | | |
| Recommending Person Disaster Relief Position | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Unit Leader Candidate is compatible with “Traits of a Unit Leader” (below) | | | | | | | | | | | | | | | | | | | | | | | | | | ☐ Yes | | | | | | ☐ No | | |
| Unit Leader Candidate is an active member of a Christian church | | | | | | | | | | | | | | | | | | | | | | | | | | ☐ Yes | | | | | | ☐ No | | |
| Recommending Person’s Relationship to Unit Leader Candidate | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| Comments | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature/Name | | | |  | | | | | | | | | | | | | | | | | | | | | | | Date | | | |  | | | |
| AREA COORDINATOR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yellow Cap Credentials Verified | | | | | | | | | ☐ | | | | | | | | | | | | | | | | | | | | | | | | | |
| Unit Leader Candidate Recommended | | | | | | | | | | | ☐ Yes | | | | | | | ☐ No | | |  | | | | | | | | | | | | | |
| Comments | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature/Name | | | |  | | | | | | | | | | | | | | | | | | | | | | Date | | | |  | | | | |
| SPECIALTY COORDINATOR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Unit Leader Approved | | | | | | | ☐ Yes | | | ☐ No | | | | | | | | | | | | | | | | | | | | | | | | |
| Comments | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature/Name | | | |  | | | | | | | | | | | | | | | | | | | | | | Date | | | |  | | | | |
| STATE DISASTER RELIEF DIRECTOR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Unit Leader Approved | | | | | | | ☐ Yes | | | ☐ No | | | | | | | | | | | | | | | | | | | | | | | | |
| Comments | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature/Name | | | |  | | | | | | | | | | | | | | | | | | | | | Date | | | | | |  | | | |

Traits of a Unit Leader:

Christian, spiritually Mature Active member of Christian church Active in Disaster Relief

Good reputation Demonstrated leadership skills Wise steward of resources

Mature adult Willingness to learn and train Ability/willing to deploy

Current Yellow Cap