DISASTER SERVICE WORKER VOLUNTEER REGISTRATION (Page 1 of 2)

LOCAL AND STATE INFORMATION

Loyalty Oath under Code of Civil Procedure §2015.5 & Title 19, Div.2, Chap.2, Sub-Chap.3, §2573.1

TYPE OR PRINT IN INK SHADED AREAS REQUIRED BY PROGRAM REGULATIONS

| | This block completed ONLY by Accredited Disaster Council, designated government agency o jurisdiction. | | | | |
|----------------------|---|------------------------------|--|--|--|
| | CLASSIFICATION:S | SPECIALTY: | | | |
| | REGISTERING AGENCY OR JURISDICTION: CITY OF CALABASAS | | | | |
| ATTACH PHOTOGRAPH | SIGNATURE OF AUTHORIZED PERSON: | TITLE: Public Safety Manager | | | |
| | REGISTRATION DATE: | _ RENEWAL DATES: | | | |
| HERE | EXPIRATION DATE:* # | _ DSW CARD ISSUED?: NO? YES? | | | |
| | PROCESSED BY: | DATE: | | | |
| | TO CENTRAL FILES: | | | | |

| NAME: LAST F | | FIRST MI | | SSN: | | |
|--|-------|--|---------|-------|---|--|
| ADDRESS: | | CITY: | | STATE | ZIP: | |
| COUNTY: | | HOME PHONE: | | | WORK PHONE: | |
| PAGER: | | E-MAIL: | | | DATE OF BIRTH: (optional) | |
| DRIVER LICENSE NUMBER: (if applicable) | | DRIVER LICENSE CLASSIFICATION: A? B? C? OTHER DRIVING PRIVILEGES: | | | LICENSE EXPIRATION DATE: | |
| PROFESSIONAL LICENSE: (if applicable) | | FCC LICENSE: (if applicable) | | | LICENSE EXPIRATION DATE: | |
| IN CASE OF EMERGENCY, CONTACT: | | | | | EMERGENCY PHONE: | |
| PHYSICAL IDENTIFICATION: | HAIR: | EYES: | HEIGHT: | WEI | GHT: (optional) BLOOD TYPE: (optional) | |
| COMMENTS: | | | | | | |

DISASTER SERVICE WORKER VOLUNTEER REGISTRATION (Page 2 of 2)

Government Code §3108-3109:

Every person who, while taking and subscribing to the oath or affirmation required by this chapter, states as true any material matter which he or she knows to be false, is guilty of perjury, and is punishable by imprisonment in the state prison for two, three, or four years. Every person having taken and subscribed to the oath or affirmation required by this chapter, who, while in the employ of, or service with, the state or any city, and county, state agency, public district, or disaster council or emergency organization advocates or becomes a member of any party or organization, political or otherwise, that advocates the overthrow of the government of the United States by force or violence or other unlawful means, is guilty of a felony, and is punishable by imprisonment in the state prison.

| LOYALTY OATH OR AFFIRMATION (GOVERNMENT CODE §3102) | | | | | | |
|---|--|--|--|--|--|--|
| I,, do solemnly sv | wear (or affirm) that I will support and | | | | | |
| efend the Constitution of the United States and the Constitution of the State of California against all enemies, foreign | | | | | | |
| and domestic; that I will bear true faith and allegiance to the Constitution of the United States and the Constitution of | | | | | | |
| the State of California; that I take this obligation freely, without any mental reservations or purpose of evasion; that I will | | | | | | |
| well and faithfully discharge the duties upon which I am about to enter. I certify under penalty of perjury that the | | | | | | |
| foregoing is true and correct. | | | | | | |
| | | | | | | |
| | | | | | | |
| DATE SIGNATURE | | | | | | |
| | | | | | | |
| SIGNATURE OF OFFICIAL AUTHORIZED TO ADMINISTER LOYALTY OATH | TITLE | | | | | |

*Registration for the active DSW Volunteer is effective for the period the person remains a member with that organization; for a volunteer registering for an intermittent or a single event, the expiration date is set at the discretion of the Accredited Disaster Council but not to exceed one year. (See Govt. Code §3102) Cal OES DSW Registration Rev. 1/2023