

# Cincinnati-Hamilton County Homeland Security Training Course Registration

## Course Title: **ROGREMS 2.0**

January 17, 25 – February 1, 8, 15, 22 & 29, 2012  
(Hours 1 p.m. to 4:00 p.m.)

PLEASE TYPE OR PRINT ALL INFORMATION

Name:

Current Job Position:

**Name & Address of Organization Represented:**

Work Phone:

Mobile:

Male

Female

Fax:

Home Phone:

Email Address:

Complete the information below regarding the date you would like to attend.

First Choice

Second Choice

Third Choice

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any disabilities (including allergies or medical conditions) which require special considerations? Yes  No  If yes, please describe

Briefly describe your job responsibilities as they relate to the course for which you are applying, and identify how you will use the information obtained from this course:

“I certify that the information recorded on this application is correct. I agree to abide by the policies stated in the most recently published Ohio Emergency Management Agency Training Catalog”

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Applicant's Signature                      Date                      Supervisor's Signature                      Date

Send Applications to:

Cincinnati-Hamilton County Homeland Security  
Attention: Barry Webb, Training Coordinator  
Fax: 513.263.8095  
Email: Barry.Webb@hamilton-co.org