



California Governor's Office of Emergency Services

Application for California Emergency Services Net participation

Date:

First Name: Enter your first name.

Last Name: Enter your last name.

Amateur Radio Callsign: Enter your amateur callsign.

Work Phone: Enter your work phone number, if applicable.

Cell Phone: Enter your cell phone number, if applicable.

Home Phone: Enter your home phone number.

Email: Enter your preferred email address.

Public Safety Agency: Enter the name of the agency with which you are associated.

Agency Callsign: Enter your agency's amateur callsign, if it has one.

Operating from:

EOC:

Alternate EOC:

Satellite (with comms to EOC):

Net Participation:

Monday, 2000 hrs:

Wednesday, 1000 hrs:

Download this file, fill out, save and email as an attachment to
Communications Center Operations Officer: caloes.socc1@gmail.com