



PUBLIC ASSISTANCE PROGRAM TRAINING APPLICATION

**Emergency Management Division
Public Assistance Program
Bldg 20-B, MS: TA-20
Camp Murray, Washington 98430-5122**

Name:

Mr. Mrs. Ms.

Position/Title:

Organization Name:

Work Phone:

Organization Address:

Work Email:

City:

State:

Zip:

Course Name:

Course Location and Date:

Signature of Participant:

Date:

**For additional information, please contact
Public Assistance at 253-512-7415 or
Email ~ publicassist@emd.wa.gov or
FAX to: 253-512-7405**