

# DISASTER SERVICE WORKER REGISTRATION LOCAL AND STATE INFORMATION

Loyalty Oath under Code of Civil Procedure §2015.5



ATTACH PHOTO HERE	<i>This block to be completed ONLY by government agency or jurisdiction</i>	
	CLASSIFICATION: _____ COMMUNICATIONS _____	SPECIALTY: _____ Auxiliary Communications Service _____
	AGENCY OR JURISDICTION: _____ Sonoma County Department of Emergency Services _____	
	REGISTRATION DATE: _____	RENEWAL DATES: _____
	EXPIRATION DATE: * _____	DSW ID ISSUED?: NO <input type="checkbox"/> YES <input type="checkbox"/> ID #: _____
	PROCESSED BY: _____	DATE: _____ TO CENTRAL FILES: _____

**TYPE OR PRINT IN INK:**

NAME (Last, First, Middle Initial): _____		
ADDRESS: _____	CITY: _____	ZIP: _____
HOME PHONE: _____	WORK PHONE: _____	PAGER: _____
E-MAIL: _____	FCC LICENSE (Call sign/ Exp Date): _____	
HEIGHT: _____	WEIGHT: _____	HAIR: _____ EYES: _____ DATE OF BIRTH: _____
IN CASE OF EMERGENCY, CONTACT: _____		EMERGENCY PHONE: _____
DRIVER LICENSE NUMBER: (if applicable) _____	CLASS: _____	EXP DATE: _____
COMMENTS: _____		

**LOYALTY OATH OR AFFIRMATION (Government Code §3102)**

I, \_\_\_\_\_ do solemnly swear (or affirm) that I will support and defend 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 California; that I take this obligation freely, without any mental reservation 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 (IF UNDER 18 YEARS OLD, SIGNATURE OF PARENT/GUARDIAN)

\_\_\_\_\_  
SIGNATURE OF OFFICIAL AUTHORIZED TO ADMINISTER LOYALTY OATH TITLE

**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 knows to be false, is guilty of perjury, and is punishable by imprisonment in the state prison not less than one nor more than 14 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 county, city, 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.

\* Expiration date is typically a maximum of 5 years from the registration date.