Anne Arundel County Office of Emergency Management
HERricane Program

About: The Anne Arundel County, Maryland Office of Emergency Management (AACo OEM) and Anne Arundel Community College (AACC) invite County high school and college students ages 14-22 to participate in a free HERricane summer program. HERricane is a week-long program designed to encourage young women to explore careers in emergency management. The program will run from July 10-14 at the Anne Arundel County Office of Emergency Management in Glen Burnie and the Anne Arundel Community College in Arnold. Up to 24 students will be accepted to participate in the 2023 program.

The Program schedule is as follows:

Location: AACo OEM - 7480 Baltimore Annapolis Blvd, Glen Burnie, MD 21061
- Monday, July 10th, 8:00 am - 4:30 pm
- Tuesday, July 11th, 8:00 am - 4:30 pm

Location: AACC - 101 College Pkwy, Arnold, MD 21012
- Wednesday, July 12th, 8:00 am - 4:30 pm
- Thursday, July 13th, 8:00 am - 4:30 pm
- Friday, July 14th, 8:00 am - 4:30 pm

Eligibility: Young women ages 14-22 are encouraged to apply. Applicants must be able to provide their own transportation to and from the camp location each day.

How to Apply: Answer the questions below and email the completed application form to oemoutreach@aacounty.org no later than 4:30 pm on Friday, June 9, 2023. Selected students will be notified on Friday, June 23, 2023.
## APPLICANT INFORMATION

<table>
<thead>
<tr>
<th>Applicant Name</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone Number</td>
<td>Age</td>
</tr>
<tr>
<td>Email Address</td>
<td>Shirt Size</td>
</tr>
</tbody>
</table>

### School Type
- [ ] Public
- [ ] Private
- [ ] Homeschool
- [ ] College

### Name of School

### School Grade (as of September 2023)
- [ ] 9
- [ ] 10
- [ ] 11
- [ ] 12
- [ ] Undergraduate Freshman
- [ ] Undergraduate Sophomore
- [ ] Undergraduate Junior
- [ ] Undergraduate Senior

### Additional Questions

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you have reliable transportation to and from the camp each day?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have any food allergies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you need translation or interpretation services?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


SHORT ANSWER (300 WORDS OR LESS):

1. Describe what skills and experience you would bring to this program.

2. What do you hope to gain from this program?

3. What interests you about emergency management and related careers?
COMMITMENT

By signing below and if selected, I understand that I am committing to fulfill my responsibilities as a HERricane participant for the Anne Arundel County, Maryland Office of Emergency Management to the best of my abilities. I certify that everything written in this application is accurate to the best of my knowledge.

____________________________  ____________
Applicant Signature         Date

FOR GUARDIAN IF APPLICANT IS UNDER 18:

I have reviewed this application and I authorize my child/legal dependent to participate in the Office of Emergency Management HERricane Program.

____________________________  __________________________  ____________
Guardian Name (Print)        Guardian Signature          Date

"All qualified applicants will receive consideration without regard to race, color, religion, sex, sexual orientation, gender identity, gender expression, age, national origin, mental or physical disability, genetic information, veteran status, political affiliation, or any other status protected by federal, state, or county law."
MEDIA RELEASE FORM

I hereby grant the Anne Arundel County, Maryland and its Office of Emergency Management and the right to obtain and/or use:

● my photograph, digitalized image, video and/or voice recording
● my child’s photograph, digitalized image, video and/or voice recording

for Anne Arundel County publicity purposes.

I understand that such media and all subsequent uses of that media, including publications, presentations, websites, videos, multimedia productions, and social media posts, become the property of Anne Arundel County and may be disseminated to the public via appropriate media channels.

Anne Arundel County shall be the sole owner of all rights, title, and interests in and to the photographs and recording hereunder, and no one, including myself, shall have any right of action against the county or any other party arising out of existence or any use of the photographs or recordings, regardless of the cause of action that may exist or be alleged.

I certify that I am over 18 years of age and that I have the full legal authority to execute this authorization on my own behalf and/or my child’s behalf.

__________________________________  _____________

Applicant Signature               Date

FOR GUARDIAN IF APPLICANT IS UNDER 18:

__________________________________  ____________________________  _____________

Guardian Name (Print)               Guardian Signature               Date