

**National Crisis Responder Credentialing Program (NCRCP)  
The National Organization for Victim Assistance**

**Renewal Instructions**

This page is for reference only. Please retain for your records.

**Goals of the NCRCP:**

- To promote active and regular development and training in the area of crisis response.
- To provide a measure of validation that a responder has a minimum level of training and experience which can be valuable information
- To identify a network of trained responders in the event of the need for mutual aid.

**Renewal Checklist (please include in this order):**

- o Application (received February 1-28 or August 1-31)
- o Sixteen (16) hours of continuing education from NOVA and/or other disaster-related programs in the past two years
- o Verified sixteen (16) hours of experience/practice working with people in crisis situations in the past two years
- o Current background check
- o \$75 fee (check, money order or credit card)
- o All documents and copies included, signed and notarized where requested
- o Re-verify National Incident Management System courses 100, 200, 700 and 800

Please complete this renewal application and mail to:

**NCRCP Applications  
National Organization for Victim Assistance (NOVA)  
510 King Street, Suite 424  
Alexandria, Virginia 22314  
703-535-6682**

**[www.trynova.org](http://www.trynova.org)**

Email questions to [NCRCP@trynova.org](mailto:NCRCP@trynova.org)

**National Crisis Responder Credentialing Program (NCRCP)  
The National Organization for Victim Assistance  
(Renewal applications only)**

**NCRCP USE ONLY**

Date received:	Credential number:
<input type="radio"/> Renewal Recommended	<input type="radio"/> More information Needed

**CONTACT INFORMATION**

Your full name:	
Work phone:	
Home Phone:	
Fax:	
Email address:	
Home Mailing Address:	
Current position title: (paid or volunteer)	
Agency* name:	
Agency contact:	
Agency contact phone:	
Agency email:	
Agency Mailing Address:	
Please send mail to	<input type="radio"/> Home address <input type="radio"/> Work address

\*If you are not affiliated with an organization or agency, write "SELF"

**NOVA CONTINUING EDUCATION/TRAINING VERIFICATION**

**Total hours** of NOVA crisis training:

NOVA's Annual Conference (trauma/crisis workshops)

Hours:

Session(s):

Date(s):

NOVA's Bi-Annual Crisis Response Team Conference training  
(all workshops count)

Hours:

Session(s):

Date(s):

## TRAINING & EDUCATION VERIFICATION

<b>Total hours</b> for associated crisis/disaster related training & education*: Include copies of certificates	
Course provider:	Hours:
Course:	Date(s):
Course provider:	Hours:
Course:	Date(s):
Course provider:	Hours:
Course:	Date(s):
Course provider:	Hours:
Course:	Date(s):
Course provider:	Hours:
Course:	Date(s):
Course provider:	Hours:
Course:	Date(s):
Course provider:	Hours:
Course:	Date(s):
* Training documentation might include but is not limited to NOVA Training of Trainers, International Critical Incident Stress Foundation, FEMA, Association of Traumatic Stress Specialists, American Red Cross, Salvation Army academic courses, etc. If you have questions about whether training qualifies, please contact NOVA.	

**GROUP EXPERIENCE/PRACTICE (3) VERIFICATION (8 Hours)**

Group Facilitating/Scribing Crisis Intervention, Actual or Practice		
<input type="checkbox"/> Location:	Date:	Hours:
<input type="checkbox"/> Location:	Date:	Hours:
<input type="checkbox"/> Location:	Date:	Hours:

- More documentation on a separate sheet.

**INDIVIDUAL EXPERIENCE/PRACTICE (3) VERIFICATION (8 Hours)**

Individual Crisis Intervention, Actual or Practice		
<input type="checkbox"/> Location:	Date:	Hours:
<input type="checkbox"/> Location:	Date:	Hours:
<input type="checkbox"/> Location:	Date:	Hours:

- More documentation on a separate sheet.

**NATIONAL INCIDENT MANAGEMENT SYSTEM VERIFICATION**

<input type="checkbox"/> NIMS 100	Date:
<input type="checkbox"/> NIMS 200	Date:
<input type="checkbox"/> NIMS 700	Date:
<input type="checkbox"/> NIMS 800	Date:

**BACKGROUND CHECK VERIFICATION**

<input type="checkbox"/> I verify that I have obtained an official background check or report of Computerized Criminal History and provided documentation.
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## NCRCP PAYMENT

Credentialing Fee is <b>\$75</b> for two years:	
Payment form*:	<input type="radio"/> Check to "NOVA" <input type="radio"/> Money order to "NOVA"
	<input type="radio"/> VISA/MasterCard/American Express
Credit Card Number:	
Expiration Date:	
Name on Card:	
Billing Address on File with Issuing Bank:	
*Payment Terms: Returned checks, declined money orders or declined credit cards are subject to a \$25 fee.	

## NCRCP PROGRAM DISCLAIMER

NCRCP is a voluntary NOVA national credentialing entity for crisis responders and providers. NCRCP makes every effort to ensure that applicants meet the minimum standards for credentialing.

NCRCP makes every effort to ensure that applicants' information represents appropriate crisis response training, education and experience. But NCRCP cannot guarantee the accuracy of the information provided by applicants.

NCRCP has no educational, legal, statutory, regulatory or investigative authority to ensure that applicants are qualified or competent to provide services to survivors of crises.

NCRCP reserves the right to make changes in the application requirements and processes at any time and without notice.

By completing this application and signing below with notarization, I understand the following:

- I am submitting my all my information in order to verify that I meet the minimum standards required for the NOVA Nation Crisis Response Credentialing Program (NCRCP).
- As a credentialed crisis responder in good standing with NOVA, I will continue with training, education and experience in the area of community crisis and disaster response.
- I have sought to provide information that is true and accurate to the best of my ability.
- I have read and agree with the Code of Professional Ethics for Crisis Responders and have not been terminated from a position, paid or voluntary, because of a violation of ethical standards since my last application.
- I have read and understand the NCRCP Disclaimer.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

NOTARIZATION

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary

**National Organization for Victim Assistance  
Code of Professional Ethics for Crisis Responders  
PLEASE RETAIN FOR PERSONAL REFERENCE**

- I. In relationships with victims, witnesses or survivors, the Crisis Responder shall:**
1. Recognize the interests of the victims, witnesses or survivors as a primary responsibility.
  2. Respect and protect the civil and legal rights of victims, witnesses or survivors.
  3. Respect the privacy and confidentiality rights of victims, witnesses or survivors, subject only to laws or regulations requiring disclosure of information to appropriate other sources.
  4. Respond compassionately to each victim, witness or survivor, withholding personal opinion, and accepting each person's statement of events and reactions as it is told.
  5. Provide services to each person without attributing blame, no matter what the person's conduct was at the time of the victimization or at another stage of the person's life.
  6. Foster maximum self-determination on the part of the victims, witnesses or survivors.
  7. Serve as an advocate when requested and, in that capacity, act on behalf of the victims', witnesses' or survivors' stated needs without regard to personal convictions and within accepted legal parameters.
  8. Provide individuals with personalized services, working for their welfare without concern about personal gain.
  9. Should one person's needs conflict with another's, act with regard to one person only after promptly referring the other to another qualified Crisis Responder.
  10. Maintain a professional relationship with victims, witnesses or survivors at all times while providing crisis intervention, companionship, post-trauma counseling and other services.
  11. Make prompt referrals to other resources or services only in the best interest of the person served, avoiding any conflict of interest in the process.
  12. Respect the religious or spiritual beliefs and practices of victims, witnesses or survivors and refer them promptly to appropriate spiritual leaders when requested.
  13. Proactively affirm positive coping strategies and hope for the future in the aftermath of tragedy.
  14. Provide opportunities for colleague Crisis Responders to seek appropriate services when traumatized by a crisis event.
- II. In relationships with colleagues, other professionals, and the public, the Crisis Responder shall:**
1. Conduct relationships with colleagues in such a way as to promote respect and improvement of service.
  2. Make statements that are critical of colleagues only if they are verifiable and constructive in purpose.
  3. Conduct relationships with allied professionals such that they are given equal respect and dignity as Crisis Response professionals.
  4. Take steps to quell negative, insubstantial rumors about colleagues and allied professionals.
  5. Share knowledge and encourage proficiency and excellence in victim assistance among colleagues and allied professionals, paid and volunteer.
  6. Provide professional support, guidance, and assistance to Crisis Responders who are new to the field in order to promote consistent quality and professionalism in crisis response.

7. Seek to ensure that volunteers in crisis response have access to the training, supervision, resources, and support required in their efforts to assist victims, witnesses or survivors after traumatic events.
8. Act to promote disaster and violence prevention as a public service and as an adjunct to crisis response efforts.
9. Respect the laws of the state or country in which one is working, while working to change those that may be unjust or discriminatory.

**III. In her or his professional conduct, the Crisis Responder shall:**

1. Maintain high personal and professional standards in the capacity of a service provider and advocate for victims, witnesses or survivors.
2. Seek and maintain proficiency through continuing education and practice in the delivery of services to victims, witnesses or survivors.
3. Not discriminate against any victim, employee, colleague, allied professional, or member of the public on the basis of age, gender, disability, ethnicity, race, national origin, religious belief, or sexual orientation.
4. Not reveal to the public the name or other identifying information about victims, witnesses or survivors served without clear permission or legal requirements to do so.
5. While engaging in crisis response work on behalf of NOVA, avoid making any public statements unless clearly directed to do so by NOVA, and if so directed, avoid making statements on public policies that are in conflict with NOVA's policies.
6. Not use her or his official position to secure gifts, monetary rewards, or special privileges or advantages.
7. Report to NOVA's Crisis Response Coordinator or NOVA's management team the conduct of any colleague or allied professional that constitutes mistreatment of victims, witnesses or survivors or that brings the profession into disrepute.
8. Report to competent authorities any conflict of interest that prevents oneself or a colleague from being able to provide competent services to victims, witnesses or survivors, or to work cooperatively with colleagues or allied professionals, or to be impartial in the treatment of any victims, witnesses or survivors.

**IV. In his or her responsibility to any other profession, the Crisis Responder will be bound by the ethical standards of the allied profession of which she or he is a member.**