

A Publication of the  
National Wildfire  
Coordinating Group

**NATIONAL INTERAGENCY  
INCIDENT MANAGEMENT SYSTEM**

**TASK BOOK FOR THE POSITION OF**

Sponsored by  
United States  
Department of Agriculture

**PLANNING SECTION CHIEF TYPE 1  
(PSC1)  
PLANNING SECTION CHIEF TYPE 2  
(PSC2)**

United States  
Department of the Interior

National Association of  
State Foresters

**(WILDFIRE ASSIGNMENT REQUIRED)**



**PMS 311-23  
NFES 2331**

**August 1993**

<b>TASK BOOK ASSIGNED TO:</b>
INDIVIDUAL'S NAME, DUTY STATION, AND PHONE NUMBER
<b>TASK BOOK INITIATED BY:</b>
OFFICIAL'S NAME, TITLE, DUTY STATION, AND PHONE NUMBER
LOCATION AND DATE THAT TASK BOOK WAS INITIATED

*The material contained in this book accurately defines the performance expected of the position for which it was developed. This task book is approved for use as a position qualification document in accordance with the instructions contained herein.*

**VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK  
FOR THE POSITION OF**

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**FINAL EVALUATOR'S VERIFICATION**

I verify that all tasks have been performed and are complete with signatures. I also verify that

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has performed as a trainee and should therefore be considered for certification in this position.

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**EVALUATOR'S SIGNATURE AND DATE**

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**EVALUATOR'S PRINTED NAME, TITLE, DUTY STATION, AND PHONE NUMBER**

**AGENCY CERTIFICATION :**

I certify that \_\_\_\_\_

has met all requirements for qualification in this position and that such qualification has been issued.

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**CERTIFYING OFFICIAL'S SIGNATURE AND DATE**

---

**CERTIFYING OFFICIAL'S NAME, TITLE, DUTY STATION, AND PHONE NUMBER**

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## **NATIONAL WILDFIRE COORDINATING GROUP POSITION TASK BOOK**

Position Task Books (PTB) have been developed for designated positions within the National Interagency Incident Management System. Each PTB lists the performance requirements (tasks) for the specific position in a format that allows a trainee to be evaluated against written guidelines. Successful performance of all tasks, as observed and recorded by an evaluator, will result in a recommendation to the agency that the trainee be certified in that position.

Evaluation and confirmation of the individual's performance of all the tasks may involve more than one evaluator and can occur on incidents, in classroom simulation, and in other work situations. Designated PTBs require position performance during which the majority of required tasks are demonstrated on a single incident. Some positions also required that specific tasks be performed on a wildland fire—performance of these tasks on other types of incidents are NOT qualifying. It is important that performance be critically evaluated and accurately recorded by each evaluator. All tasks must be evaluated. All bullet statements within a task which require an action (contain an action verb) must be demonstrated before that task can be signed off.

A more detailed description of this process, definitions of terms, and responsibilities are included in the Wildland Fire Qualification Subsystem Guide 310-1. A brief list of responsibilities also appears below.

### **RESPONSIBILITIES:**

1. The **Local Office** is responsible for:
  - Selecting trainees based on the needs of the local office and the geographic area.
  - Ensuring that the trainee meets the training and experience requirements included in the Wildland Fire Qualification Subsystem Guide 310-1.
  - Issuing PTBs to document task performance.
  - Explaining to the trainee the purpose and processes of the PTB as well as the trainee's responsibilities.
  - Providing opportunities for evaluation and/or making the trainee available for evaluation.
  - Providing an evaluator for local assignments.
  - Tracking progress of the trainee.
  - Confirming PTB completion.
  - Determining certification per local policy.
  - Issuing proof of certification.
  
2. The **individual** is responsible for:
  - Reviewing and understanding instructions in the PTB.
  - Identifying desired objectives/goals.

- Providing background information to an evaluator.
  - Satisfactorily demonstrating completion of all tasks for an assigned position within three years.
  - Assuring the Evaluation Record is complete.
  - Notifying local office personnel when the PTB is completed and providing a copy.
  - Keeping the original PTB in personal records.
3. The **Evaluator** is responsible for:
- Being qualified and proficient in the position being evaluated.
  - Meeting with the trainee and determining past experience, current qualifications, and desired objectives/goals.
  - Reviewing tasks with the trainee.
  - Explaining to the trainee the evaluation procedures that will be utilized and which objectives may be attained.
  - Identifying tasks to be performed during the evaluation period.
  - Accurately evaluating and recording demonstrated performance of tasks. Satisfactory performance shall be documented by dating and initialing completion of the task. Unsatisfactory performance shall be documented in the Evaluation Record.
  - Completing the Evaluation Record found at the end of each PTB.
  - Signing the verification statement inside the front cover of the PTB when all tasks have been initialed.
4. The **Training Specialist** is responsible for:
- Identifying incident evaluation opportunities.
  - Identifying and assigning an evaluator that can provide a positive experience for the trainee, and make an accurate and honest appraisal of the trainee's performance.
  - Providing PTBs to approved trainees on the incident when local agency was unable to provide them.
  - Documenting the assignment.
  - Conducting progress reviews.
  - Conducting a close-out interview with the trainee and evaluator and assuring that documentation is proper and complete.

## QUALIFICATION RECORD

POSITION: PLANNING SECTION CHIEF TYPE 1 & 2 (PSC1 & PSC2)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p><b><u>GENERAL</u></b></p> <p>1. <u>Obtain and assemble information and materials needed for kit.</u> Kit will be assembled and prepared prior to receiving an assignment. Kit will contain critical items needed for the assignment and items needed for functioning during the first 48 hours. Kit will be easily transportable and within agency weight limitation (per National Mobilization Guide). The basic information and materials needed are:</p> <ul style="list-style-type: none"> <li>• ICS Form 202, Incident Objectives.</li> <li>• ICS Form 203, Organization Assignment List.</li> <li>• ICS Form 204, Division Assignment.</li> <li>• ICS Form 207, Organization Chart.</li> <li>• ICS Form 211, Check-In List.</li> <li>• ICS Form 213, General Message.</li> <li>• ICS Form 214, Unit Log.</li> <li>• ICS Form 215 WS, Operational Planning Worksheet, Wall Size 36-in x 64-in.</li> <li>• ICS Form 219-1 through 19, Resource Status Cards.</li> <li>• Agency specific forms appropriate to the function.</li> <li>• ICS 420-1, Field Operations Guide.</li> <li>• ICS 410-1, Fireline Handbook.</li> <li>• Position Manuals for the section.</li> <li>• Individual checklists/reminders.</li> <li>• Pens/pencils/note paper/etc.</li> <li>• Office supplies appropriate to the function.</li> </ul>	O		

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QUALIFICATION RECORD  
Continuation Sheet

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p>2. <u>Provide for the safety and welfare of assigned personnel during the entire period of supervision.</u></p> <ul style="list-style-type: none"> <li>• Recognizes potentially hazardous situations.</li> <li>• Informs subordinates of hazards.</li> <li>• Ensures that special precautions are taken when extraordinary hazards exist.</li> <li>• Ensures adequate rest is provided to all unit personnel.</li> </ul>	I		
<p>3. <u>Establish and maintain positive interpersonal and interagency working relationships.</u></p> <ul style="list-style-type: none"> <li>• Through briefings, discuss EEO, civil rights, sexual discrimination, and other sensitive issues, with assigned personnel.</li> <li>• Recognize cultural language difficulties as it impacts work output and expectations.</li> <li>• Provide equal assignment opportunities based on individual skill level.</li> <li>• Monitor and evaluate progress based on expected work standards not race, color or creed.</li> <li>• Individual agency values and policies are addressed throughout the tenure of the incident.</li> <li>• Differences in agency values and policies that affect the operation are arbitrated in a manner that fosters continuous positive working relationships.</li> </ul>	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p><b><u>MOBILIZATION</u></b></p> <p>4. <u>Obtain complete information from dispatch upon initial activation.</u></p> <ul style="list-style-type: none"> <li>• Incident name.</li> <li>• Incident order number.</li> <li>• Request number.</li> <li>• Reporting location.</li> <li>• Reporting time.</li> <li>• Transportation arrangements/travel routes.</li> <li>• Contact procedures during travel (telephone/radio).</li> </ul>	I		
<p>5. <u>Gather information necessary to assess incident assignment and determine immediate needs and actions.</u></p> <ul style="list-style-type: none"> <li>• Incident Commander's name, location and contact.</li> <li>• Current resource commitments.</li> <li>• Current situation.</li> <li>• Expected duration of assignment.</li> <li>• Terrain.</li> <li>• Weather.</li> <li>• Agency Administrator's briefing requirements (as appropriate).</li> </ul>	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<b><u>INCIDENT ACTIVITIES</u></b>			
6. <u>Arrive at incident.</u> <ul style="list-style-type: none"> <li>• Check in at check-in location according to agency guidelines and within acceptable time limit.</li> <li>• Locate assigned location.</li> <li>• Arrive properly equipped.</li> </ul>	I		
7. <u>Attend Agency Administrator and/or outgoing Incident Commander briefing.</u> <ul style="list-style-type: none"> <li>• Obtain a <u>completed escaped fire situation analysis (EFSA), a written delegation of authority, a copy of the most recent ICS Form 209, map or maps of the incident, and a completed ICS Form 201.</u></li> <li>• Complete the appropriate checklist for takeover of large incidents.</li> </ul>	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p>8. <u>Obtain briefing from your Incident Commander.</u> May be one-on-one or in an Incident Management Team Meeting.</p> <ul style="list-style-type: none"> <li>• Receive Incident Commander's priorities, goals and objectives for the Incident Management Team.</li> <li>• Receive Incident Commander's priorities, goals and objectives for the incident.</li> <li>• Obtain initial instructions concerning the tasks expected of the Planning Section.</li> <li>• Receive expected timeframes for briefings, planning meetings and team meetings.</li> </ul>	I		
<p>9. <u>Collect information from outgoing Section Chief, Initial Incident Commander or other personnel with information relevant to your section.</u></p> <ul style="list-style-type: none"> <li>• Obtain status of incident and assigned resources.</li> <li>• Obtain status of existing Planning Section.</li> </ul>	I		
<p>10. <u>Evaluate and share with incident management team members, all information for your section and what is anticipated for incident operations based on expected duration, size and type of incident.</u></p>	I		

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<p>11. <u>Evaluate and monitor current situation.</u></p> <ul style="list-style-type: none"> <li>• Determine if present plan of action will meet incident objectives.</li> <li>• Determine if the present plan is congruent with the incident strategic plan (Escaped Fire Situation Analysis (EFSA) for wildfire incident).</li> <li>• Identify problems and concerns.</li> <li>• Advise Incident Commander and other appropriate Incident Management Team personnel.</li> </ul>	I		
<p>12. <u>Supervise Section.</u></p> <ul style="list-style-type: none"> <li>• Communicate job performance requirements to subordinates.</li> <li>• Continuously evaluate performance.</li> <li>• Communicate deficiencies immediately and take corrective action.</li> <li>• Identify training needs and provide opportunities for training.</li> <li>• Prepare and discuss formal performance evaluation.</li> <li>• Establish priorities and coordinate units within the section.</li> </ul>	I		
<p>13. <u>Incident Planning Cycle.</u></p> <ul style="list-style-type: none"> <li>• Establish planning cycle for incident.</li> <li>• Publish and post planning cycle at appropriate locations.</li> <li>• Distribute cycle to Incident Commander, command and general staff, and other appropriate personnel.</li> </ul>	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p>14. <u>Ensure that Planning Meeting location is well organized.</u> Required resources are in place prior to each meeting.</p> <ul style="list-style-type: none"> <li>• Large ICS Form 215.</li> <li>• Large scale schematic map of incident.</li> <li>• Flip charts.</li> <li>• Felt tip markers.</li> <li>• Photos.</li> </ul>	I		
<p>15. <u>Ensure that necessary support staff are aware of planning meeting assignments.</u></p> <ul style="list-style-type: none"> <li>• Situation Unit Leader has accurate and current incident, regional and national situation status.</li> <li>• Resource Unit Leader has accurate and current status of resources on the incident as well as regionally and nationally.</li> <li>• All needed technical specialist input (especially meteorologist and fire behavior analyst) is presented.</li> <li>• Arrangements are made for documentation and recording of applicable information.</li> </ul>	I		

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<p>16. <u>Planning meetings.</u></p> <ul style="list-style-type: none"> <li>• Inform identified planning meeting attendees of the time, location and information expected of them for the meeting.</li> <li>• Define objectives, agenda and time expectations for the planning meeting.</li> <li>• Agree to and post at appropriate locations, the planning meeting agenda.</li> <li>• Identify or reaffirm incident objectives (Incident Commander [I.C.] identify(s) or approves objectives. The I.C. should address objectives or ask the PSC to do so).</li> <li>• Display, describe and utilize necessary agency policy, legal and fiscal constraints and political considerations to be used in the planning meeting to review adequacy of strategic plans (EFSA for wildfire incident) and in development of Incident Action Plan (IAP).</li> <li>• Present accurate, adequate and current situation and resource status information with accurate maps.</li> <li>• Ensure that Operations Section Chief <u>identifies incident control lines, division boundaries and drop points; and prioritizes divisions in the event choices must be made in allocating scarce resources</u>, on map(s) visible to all attendees.</li> <li>• Ensure that Operations Section Chief <u>identifies tactics; resources needed; and reporting/pickup locations and time</u> by division/groups and that this information is properly displayed on ICS Form 215 or equivalent.</li> </ul>	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul style="list-style-type: none"> <li>• Compare resources needed to implement the Operations Section Chief's proposed incident and action plan to available resources and reconcile any differences.</li> <li>• Display available resources for IAP on ICS Form 215.</li> <li>• Coordinate all attendees to assure the plan as proposed can be implemented and supported; examples - can Air Operations provide the needed air support and transportation needs; can Logistics accomplish personnel feeding on time, provide necessary ground transportation, and provide required tools, etc.?</li> <li>• Resolve concerns and conflicts.</li> <li>• Adjust IAP accordingly.</li> <li>• Identify elements of the IAP required from other sections and time needed by the Planning Section; e.g., <u>safety message, communication plan, medical plan, air operations summary, traffic plan and other special messages.</u></li> <li>• Conduct planning meeting in 30 minutes or less.</li> </ul>			

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p>17. <u>Incident Action Plan (IAP).</u></p> <ul style="list-style-type: none"> <li>• Ensure planning staff completes required elements of the IAP within required timeframes.</li> <li>• Obtain element from other appropriate sections within established timeframes.</li> <li>• Assemble the elements into an IAP.</li> <li>• Ensure the IAP <u>meets incident objectives, is congruent with approved strategic plan (EFSA for a wildfire incident).</u></li> <li>• Obtain the Incident Commander's approval and signature on IAP.</li> <li>• Identify how many copies of IAP are needed.</li> <li>• Ensure Documentation Unit makes appropriate copies of IAP.</li> <li>• Identify information from the IAP that needs to be known prior to the operational period briefing and who needs to know.</li> <li>• Provide accurate information to who needs to know things prior to the operational period briefing; e.g., <u>Air Operations, Ground Support, Food Unit, Supply Unit and Agency Dispatch.</u></li> </ul>	I		
<p>18. <u>Incident strategic plan.</u></p> <ul style="list-style-type: none"> <li>• Ensure the agency's incident strategic plan is appropriate. If it needs revision the Agency Administrator is responsible (may ask the Incident Commander to revise for the Agency Administrator's approval).</li> </ul>	I		

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19. <u>Operational period briefings.</u> <ul style="list-style-type: none"> <li>• Identify who needs to attend.</li> <li>• Post location, time and required attendees of briefings in conspicuous locations.</li> <li>• Participate in the operational period briefing, particularly emphasizing any changes from the written Incident Action Plan.</li> </ul>	I		
20. <u>ICS Form 209.</u> <ul style="list-style-type: none"> <li>• Ensure 209 is completed within established timeframes.</li> <li>• Review for accuracy and completeness, approve and sign, and submit to appropriate office.</li> </ul>	I		
21. <u>Interact and coordinate with all command and general staff.</u> <ul style="list-style-type: none"> <li>• Receive and transmit needed information.</li> </ul>	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p>22. <u>Monitor incident status and develop alternative strategies.</u></p> <ul style="list-style-type: none"> <li>• Utilize technical specialists, operations personnel and agency personnel.</li> <li>• Document and present potential alternative strategies to Incident Commander and General Staff.</li> <li>• Advise Command and general staff and incident commander of significant changes in incident status that affect them, in a timely manner.</li> </ul>	I		
<p>23. <u>Coordinate incident rehabilitation need.</u></p> <ul style="list-style-type: none"> <li>• Coordinate with responsible agencies.</li> </ul>	I		
<p>24. <u>Resource conditions and needs.</u></p> <ul style="list-style-type: none"> <li>• Ensure that rest, recuperation and release requirements of resources are tracked and preparations are made to meet them (including requirements by terms of employment).</li> </ul>	I		
<p>25. <u>Ensure all personnel and equipment time records are complete and have been submitted to the Time Unit Leader at the end of each operational period.</u></p>	I		

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26. <u>ICS Form 214.</u> <ul style="list-style-type: none"> <li>• Submit completed and legible Unit Logs containing pertinent information to the Documentation Unit for each operational period.</li> </ul>	I		
<b><u>DEMOBILIZATION</u></b>			
27. <u>Consider demobilization early enough during the incident so that an adequate demobilization plan is in place prior to the actual need to release resources.</u>	I		
28. <u>Incident Demobilization Plan.</u> <ul style="list-style-type: none"> <li>• Develop in coordination with Command, general staff and agency dispatchers.</li> <li>• Review for accuracy and validity.</li> <li>• Obtain Incident Commander's approval, signature.</li> </ul>	I		
29. <u>Surplus list.</u> <ul style="list-style-type: none"> <li>• Request all sections submit names or lists of surplus and potentially surplus personnel and resources to Demobilization Unit 48 hours in advance of them actually becoming surplus.</li> <li>• Obtain Incident Commander's approval.</li> </ul>	I		

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30. <u>Demobilization schedule.</u> <ul style="list-style-type: none"> <li>• Ensure a demobilization schedule is prepared in coordination with command and general staffs and agency dispatchers.</li> <li>• Schedule surplus resources and personnel for proper demobilization.</li> </ul>	I		
31. <u>Demobilize surplus resources and personnel.</u> <ul style="list-style-type: none"> <li>• Implement approved Demobilization Plan and schedule.</li> <li>• Utilize processes established for the area in which the incident has occurred.</li> </ul>	I		
32. <u>Incident Reports and Narratives.</u> <ul style="list-style-type: none"> <li>• Ensure all required incident reports and narrative are completed to agree upon standards prior to leaving incident.</li> <li>• Properly assemble and file up-to-date incident records.</li> </ul>	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
33. <u>Demobilization and check-out.</u> <ul style="list-style-type: none"> <li>• Receive demobilization instructions from work supervisor.</li> <li>• Brief subordinates on procedures and responsibilities.</li> <li>• Ensure that incident and agency demobilization procedures are followed. If required, ICS Form 221 (Demobilization Check-out) is completed and turned in to appropriate person.</li> <li>• Brief replacement, if necessary.</li> </ul>	I		
34. <u>Debrief Agency Administrator.</u> <ul style="list-style-type: none"> <li>• Participate in debriefing.</li> </ul>	I		

\*Code: O = task can be completed in any situation (classroom, simulation, prescribed fire, daily job, etc.)  
 I = task must be performed on an incident (flood, fire, search & rescue, etc.)  
 W = task must be performed on a wildfire incident  
 /R = Rare event—the evaluation assignment may not provide opportunities to demonstrate performance. The evaluator may be able to determine skills/knowledge through interview or the home office may need to arrange for another assignment or a simulation.



## INSTRUCTIONS for EVALUATION RECORD

**There are four separate blocks allowing evaluations to be made. These evaluations may be made on incidents, by simulation in classroom, or in daily duties, depending on what the position task book indicates. This should be sufficient for qualification in the position if the individual is adequately prepared. If additional blocks are needed, a page can be copied from a blank task book and attached.**

**Evaluator's name, incident/office title & agency:** List the name of the evaluator, his/her incident position (on incidents) or office title, and agency.

**Evaluator's home unit address & phone:** self explanatory

**#:** The number in the upper left corner of the experience block identifies a particular experience or group of experiences. This number should be placed in the column labeled "Evaluation Record #" on the Qualification Record in order to indicate the circumstances under which a particular task was performed.

**Location of Incident/Simulation:** Identify the location where the tasks were performed by agency and office.

**Incident Type:** Enter type of incident, e.g., wildfire, search and rescue, flood, etc.

**Number and Type of Resources:** Enter the number of resources and types assigned to the incident pertinent to the trainee's task book position.

**Duration:** Enter inclusive dates during which the individual was evaluated. This block may indicate a span of time covering several small and similar incidents if the individual has been evaluated on that basis, i.e., several initial attack fires in similar fuel types.

**Mgt. Level:** Indicate ICS organization level, i.e., Type 4, Type 3, Type 2, Type 1 or Area Command.

**NFFL Fuel Model:** For wildfire experience, enter number (1-13) of the fuel model in which the incident occurred and under which the individual was evaluated.

- |                                 |                                |
|---------------------------------|--------------------------------|
| 1. Short Grass (1 foot)         | 8. Closed Timber Litter        |
| 2. Timber (grass & understory)  | 9. Hardwood Litter             |
| 3. Tall grass (2 1/2 feet)      | 10. Timber (litter understory) |
| 4. Chaparral (6 feet)           | 11. Light Logging Slash        |
| 5. Brush (2 feet)               | 12. Medium Logging Slash       |
| 6. Dormant brush-Hardwood Slash | 13. Heavy Logging Slash        |
| 7. Southern Rough               |                                |

**Recommendation:** Check as appropriate and/or make comments regarding the future needs for development of this trainee.

**Date:** List the date the record is being completed.

**Evaluator's initials:** Initial here to authenticate your recommendations and to allow for comparison with initials in the Qualifications Record.

**Evaluator's relevant red card rating:** List your certification relevant to the trainee position you supervised.

## Evaluation Record

TRAINEE NAME		TRAINEE POSITION			
<b>#1</b>	Evaluator's name, incident/office title & agency:				
Evaluator's home unit address & phone:					
Location of Incident or Simulation (agency & area)	Incident Type (wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Mgt. Level (Area Command, Type 1, 2, 3, or 4)	NFFL Fuel Model
			to		
<p>The tasks initialed &amp; dated by me have been performed under my supervision and in a satisfactory manner by the above named trainee. I recommend the following for further development of this trainee:</p> <p>_____ The individual has successfully performed all tasks for the position and should be considered for certification.</p> <p>_____ The individual was not able to complete certain tasks (comments below) or additional guidance is required.</p> <p>_____ Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.</p> <p>_____ The individual is severely deficient in the performance of tasks for the position and must complete all training (both mandatory &amp; suggested) prior to further assignment as a trainee.</p> <p>Recommendations: _____</p> <p>_____</p> <p>Date: _____ Evaluator's initials: _____ Evaluator's relevant red card (or agency certification) rating: _____</p>					

<b>#2</b>	Evaluator's name, incident/office title & agency:				
Evaluator's home unit address & phone:					
Location of Incident or Simulation (agency & area)	Incident Type (wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Mgt. Level (Area Command, Type 1, 2, 3, or 4)	NFFL Fuel Model
			to		
<p>The tasks initialed &amp; dated by me have been performed under my supervision and in a satisfactory manner by the above named trainee. I recommend the following for further development of this trainee:</p> <p>_____ The individual has successfully performed all tasks for the position and should be considered for certification.</p> <p>_____ The individual was not able to complete certain tasks (comments below) or additional guidance is required.</p> <p>_____ Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.</p> <p>_____ The individual is severely deficient in the performance of tasks for the position and must complete all training (both mandatory &amp; suggested) prior to further assignment as a trainee.</p> <p>Recommendations: _____</p> <p>_____</p> <p>Date: _____ Evaluator's initials: _____ Evaluator's relevant red card (or agency certification) rating: _____</p>					

## Evaluation Record (Continuation Sheet)

TRAINEE NAME		TRAINEE POSITION			
#3	Evaluator's name, incident/office title & agency:				
Evaluator's home unit address & phone:					
Location of Incident or Simulation (agency & area)	Incident Type (wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Mgt. Level (Area Command, Type 1, 2, 3, or 4)	NFFL Fuel Model
			to		
<p>The tasks initialed &amp; dated by me have been performed under my supervision and in a satisfactory manner by the above named trainee. I recommend the following for further development of this trainee:</p> <p>_____ The individual has successfully performed all tasks for the position and should be considered for certification.</p> <p>_____ The individual was not able to complete certain tasks (comments below) or additional guidance is required.</p> <p>_____ Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.</p> <p>_____ The individual is severely deficient in the performance of tasks for the position and must complete all training (both mandatory &amp; suggested) prior to further assignment as a trainee.</p> <p>Recommendations: _____</p> <p>Date: _____ Evaluator's initials: _____ Evaluator's relevant red card (or agency certification) rating: _____</p>					

#4	Evaluator's name, incident/office title & agency:				
Evaluator's home unit address & phone:					
Location of Incident or Simulation (agency & area)	Incident Type (wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Mgt. Level (Area Command, Type 1, 2, 3, or 4)	NFFL Fuel Model
			to		
<p>The tasks initialed &amp; dated by me have been performed under my supervision and in a satisfactory manner by the above named trainee. I recommend the following for further development of this trainee:</p> <p>_____ The individual has successfully performed all tasks for the position and should be considered for certification.</p> <p>_____ The individual was not able to complete certain tasks (comments below) or additional guidance is required.</p> <p>_____ Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.</p> <p>_____ The individual is severely deficient in the performance of tasks for the position and must complete all training (both mandatory &amp; suggested) prior to further assignment as a trainee.</p> <p>Recommendations: _____</p> <p>Date: _____ Evaluator's initials: _____ Evaluator's relevant red card (or agency certification) rating: _____</p>					