

A Publication of the  
National Wildfire  
Coordinating Group

## NATIONAL INTERAGENCY INCIDENT MANAGEMENT SYSTEM

Sponsored by  
United States  
Department of Agriculture

### TASK BOOK FOR THE POSITION OF

United States  
Department of the Interior

## INCIDENT COMMANDER TYPE 4 (ICT4)

National Association of  
State Foresters



**PMS 311-03**  
**NFES 2302**

**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**

---

**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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3833 S. Development Avenue  
Boise, Idaho 83705-5354

Order NFES # 2302

## **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: INCIDENT COMMANDER TYPE 4 (ICT4)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p><b><u>GENERAL</u></b></p> <p>1. <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		

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 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.

QUALIFICATION RECORD  
Continuation Sheet

POSITION: INCIDENT COMMANDER TYPE 4 (ICT4)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p>2. <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> <li>• Integrate cultural resource considerations into all management activities.</li> </ul>	O		

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QUALIFICATION RECORD  
Continuation Sheet

POSITION: INCIDENT COMMANDER TYPE 4 (ICT4)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p>3. <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).</p> <ul style="list-style-type: none"> <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> <li>• IRS Form 201, Incident Briefing</li> <li>• ICS Form 202, Incident Objectives.</li> <li>• ICS Form 204, Division Assignment.</li> <li>• ICS Form 213, General Message.</li> <li>• ICS Form 214, Unit Log.</li> <li>• Resource listings.</li> <li>• Telephone directory (local, assignment specific).</li> <li>• Notification requirements.</li> <li>• Incident specific reference materials.</li> <li>• Maps.</li> <li>• Documentation materials.</li> </ul>	O		
<b><u>MOBILIZATION</u></b>			
<p>4. <u>Initiate and maintain ICS Form 201.</u></p>	O		

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QUALIFICATION RECORD  
Continuation Sheet

POSITION: INCIDENT COMMANDER TYPE 4 (ICT4)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
5. <u>Gather initial data about the fire relating to:</u> <ul style="list-style-type: none"> <li>• Location.</li> <li>• Access.</li> <li>• Size.</li> <li>• Fire behavior.</li> <li>• Fuels.</li> <li>• Terrain.</li> <li>• Weather Hazards.</li> <li>• Values at risk.</li> </ul>	W		
6. <u>Observe and record pertinent data as to the cause and suppression efforts to be made while en route and upon arriving at the fires.</u>	O		
<b><u>INCIDENT OPERATIONS</u></b>			
7. <u>Size-up fire situation to determine whether the fire can be controlled with the resources available.</u> <ul style="list-style-type: none"> <li>• After analyzing information, describe:               <ul style="list-style-type: none"> <li>• Extraordinary hazards to fire fighters.</li> <li>• Estimated ROS of fire.</li> <li>• Potential threat to values.</li> <li>• Incident Objectives in priority order.</li> <li>• Strategy for fire control.</li> <li>• Strategy for protecting values.</li> </ul> </li> </ul>	W		

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QUALIFICATION RECORD  
Continuation Sheet

POSITION: INCIDENT COMMANDER TYPE 4 (ICT4)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
8. <u>Plan the most appropriate method of attack with the resources available.</u> <ul style="list-style-type: none"> <li>• Plan includes:               <ul style="list-style-type: none"> <li>• Tactical direction to complete incident objectives.</li> <li>• Coordinated sequence of events.</li> <li>• Resource assignments.</li> <li>• Immediate support needs.</li> <li>• Safety information covering all hazards and all relevant safety principles.</li> </ul> </li> </ul>	W		
9. <u>Report to supervisor or designated officer.</u> <ul style="list-style-type: none"> <li>• The existing situation.</li> <li>• The plan of attack.</li> <li>• Need for additional resources.</li> </ul>	O		
10. <u>Determine and protect the general area of origin, as needed to determine the cause of the fire.</u> <ul style="list-style-type: none"> <li>• Determine whether fire is natural or person-caused.</li> <li>• Report such to dispatcher or supervisor.</li> </ul>	O		
11. <u>Recognize and protect local resources of natural and cultural significance.</u>	O		

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QUALIFICATION RECORD  
Continuation Sheet

POSITION: INCIDENT COMMANDER TYPE 4 (ICT4)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
12. <u>Recognize jurisdictional boundaries requiring unified command.</u>  <ul style="list-style-type: none"> <li>• Establish unified command when appropriate.</li> </ul>	O		
13. <u>Direct the initial attack forces to gain control of the fire with as little suppression damage to the area as possible.</u>	W		
14. <u>Brief and keep subordinates informed.</u>  <ul style="list-style-type: none"> <li>• Concise briefing includes:               <ul style="list-style-type: none"> <li>• Incident objectives and strategy.</li> <li>• Tactics.</li> <li>• Hazards.</li> <li>• Factors affecting fire suppression.</li> <li>• Safety principles.</li> </ul> </li> </ul>	O		
15. <u>Communicate on radio using concise messages with clear-text.</u>	O		
16. <u>Monitor the weather and other environmental factors to anticipate changes in fire behavior.</u>	O		
17. <u>Establish initial organization.</u>  <ul style="list-style-type: none"> <li>• Assign responsibility for areas or functions.</li> <li>• Use interim ICS positions if complexity or span of control indicates need.</li> </ul>	O		

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QUALIFICATION RECORD  
Continuation Sheet

POSITION: INCIDENT COMMANDER TYPE 4 (ICT4)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p>18. <u>Record and maintain essential information on ICS Form 201. Keep information current.</u></p> <ul style="list-style-type: none"> <li>• Incident objectives and strategy.</li> <li>• Changes in situation.</li> <li>• Tactical decisions.</li> <li>• Resource summary.</li> <li>• Organization.</li> <li>• Sketch map.</li> <li>• Safety problems and hazards.</li> </ul>	O		
<p>19. <u>Evaluate progress.</u></p> <ul style="list-style-type: none"> <li>• Spot check tactical operations.</li> <li>• Compare actual progress to planned tactics.</li> <li>• Decide if plan will accomplish incident objectives.</li> </ul>	W		
<p>20. <u>Adjust tactics to meet changing conditions.</u></p> <ul style="list-style-type: none"> <li>• Assign resources according to incident priorities.</li> <li>• Change tactics where necessary.</li> <li>• Advise subordinates of changes.</li> </ul>	W		
<p>21. <u>Apply NWCG Fireline Handbook (410-1) contents data/information appropriately to:</u></p> <ul style="list-style-type: none"> <li>• Apply firefighting safety guides appropriately for single resource boss position.</li> <li>• Apply tactical and strategic guidelines.</li> <li>• Utilize guides as applicable regarding aircraft use.</li> </ul>	W		

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QUALIFICATION RECORD  
Continuation Sheet

POSITION: INCIDENT COMMANDER TYPE 4 (ICT4)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
22. <u>Keep supervisor or designated officer informed of progress, problems and needs.</u>	W		
23. <u>Take necessary precautions to insure the security of control lines and containment of the fire.</u>	W		
24. <u>Provide for the safety and welfare of assigned personnel during the entire period of command.</u>  <ul style="list-style-type: none"> <li>• Recognizes potentially hazardous situation.</li> <li>• Informs subordinates of hazards.</li> <li>• Controls position and function of all resources.</li> <li>• Ensures that special precautions are taken when extraordinary hazards exist.</li> <li>• Ensures adequate rest and hydration is provided all fire fighters.</li> </ul>	W		
25. <u>Follow the standard fire orders, agency policy.</u>  <ul style="list-style-type: none"> <li>• Develop plans based on safety guidelines.</li> <li>• Spot check tactical operations to ensure compliance with safety guidelines.</li> </ul>	W		
26. <u>Determine when the fire is out or safe to leave.</u>	O		

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QUALIFICATION RECORD  
Continuation Sheet

POSITION: INCIDENT COMMANDER TYPE 4 (ICT4)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
27. <u>Maintain adequate records as to events, use of personnel, equipment and supplies, and other data for fire management needs (ICS Form 201).</u>	O		
28. <u>Complete time reports, accident forms, fire reports, etc.</u>	O		
29. <u>Brief and submit complete documentation to supervisor at end of suppression action.</u>	O		
30. <u>Prepare and discuss performance evaluations with subordinates.</u>	O		
31. <u>Participate in an analysis of:</u> <ul style="list-style-type: none"> <li>• Cost effectiveness of suppression methods.</li> <li>• Meeting protection standards.</li> <li>• Management decisions made on the fire.</li> </ul>	O		
CONTINGENCY #1: Initial attack resources do not contain fire.			
32. <u>Gather information for an "escaped fire analysis".</u>	O/R		
33. <u>Arrange for logistical support needs of personnel ordered for extended attack organization.</u>	O		

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QUALIFICATION RECORD  
Continuation Sheet

POSITION: INCIDENT COMMANDER TYPE 4 (ICT4)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
34. <u>Determine suppression priorities with designated officer for interim period until relieved by an incident commander type 3 (ICT3).</u>	W		
35. <u>Brief and provide complete and accurate records to relief when appropriate (ICS Form 201).</u>  <ul style="list-style-type: none"> <li>• Review ICS Form 201.</li> <li>• Situation.</li> <li>• Incident objectives.</li> <li>• Strategy.</li> <li>• Hazards to fire fighters.</li> <li>• Current plan.</li> <li>• Method for reconnaissance.</li> <li>• Effectiveness of tactics.</li> <li>• Agencies involved.</li> <li>• ICS organization.</li> <li>• Resources summary.</li> <li>• Check-in process.</li> <li>• Radio effectiveness.</li> <li>• Logistical needs.</li> </ul>	O		

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## 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)**

<b>TRAINEE NAME</b>		<b>TRAINEE POSITION</b>			
<b>#3</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>#4</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>					