

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

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

National Association of  
State Foresters

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



**(POSITION PERFORMANCE ON A WILDLAND  
FIRE ASSIGNMENT REQUIRED)**

**PMS 311-23  
NFES 2331**

**March 1999**

<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.*

**EVALUATOR**

DO NOT COMPLETE THIS UNLESS YOU ARE RECOMMENDING THE TRAINEE FOR CERTIFICATION

**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 documented with appropriate initials.

I also verify that \_\_\_\_\_

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

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FINAL 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

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

Additional copies of this publication may be ordered from:

National Interagency Fire Center  
ATTN: Supply  
3833 S. Development Avenue  
Boise, Idaho 83705

## 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 trainee'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 wildland or prescribed fire. Some positions require that specific tasks be performed on a wildland fire. Performance of these tasks on other kinds of incidents is NOT qualifying.** It is important that performance be critically evaluated and accurately recorded by each evaluator. All tasks must be evaluated before recommending certification. 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 and Prescribed Fire Qualification Guide 310-1. A brief list of responsibilities also appears below.

### **RESPONSIBILITIES:**

1. The **Home Unit** is responsible for:
  - Selecting trainees based on the needs of the home unit and higher levels.
  - Ensuring that the trainee meets the training and experience requirements included in the Wildland and Prescribed Fire Qualification Guide 310-1.
  - Initiating 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 **Trainee** 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 home unit personnel when the PTB is completed and providing a copy.
  - Keeping the original PTB in personal records.
3. The **Evaluator** is responsible for:
- Understanding the Wildland and Prescribed Fire Qualifications System.
  - 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 this PTB.
4. The **Final Evaluator** is responsible for:
- Signing the verification statement inside the front cover of the PTB when all tasks have been initialed and if the trainee is recommended for certification.
5. The **Incident Training Specialist** is responsible for:
- Identifying incident evaluation opportunities.
  - Assuring that trainees have met prerequisites.
  - Identifying and assigning a qualified evaluator that can provide a positive experience for the trainee, and making an accurate and honest appraisal of the trainee's performance.
  - Providing PTBs to approved trainees on the incident when home unit 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.
  - Notifying trainee's home unit.

## QUALIFICATION RECORD

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

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>• PMS 410-1, Fireline Handbook.</li> <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 209, Incident Status Summary.</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, Operational Planning Worksheet.</li> <li>• ICS Form 215 WS, (wall size).</li> <li>• ICS Form 215a, Incident Safety Analysis.</li> <li>• ICS Form 215a WS, (wall size).</li> <li>• ICS Form 219-1 through 219-19, Resource Status Cards.</li> <li>• ICS Form 220, Air Operations Summary Worksheet.</li> <li>• Agency specific forms appropriate to the function.</li> <li>• Laptop computer.</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**

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

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
2. <u>Provide for the safety, welfare, and accountability of assigned personnel during the entire period of supervision.</u> <ul style="list-style-type: none"> <li>• Recognize potentially hazardous situations.</li> <li>• Inform subordinates of hazards.</li> <li>• Ensure that special precautions are taken when extraordinary hazards exist.</li> <li>• Ensure adequate rest is provided to all unit personnel.</li> </ul>	I		
3. <u>Establish and maintain positive interpersonal and interagency working relationships.</u> <ul style="list-style-type: none"> <li>• Create a work environment that provides diversity and equal opportunity for all personnel assigned to the incident.</li> </ul>	I		

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

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p><b><u>INCIDENT ACTIVITIES</u></b></p> <p>4. <u>Attend Agency Administrator and/or outgoing Incident Commander briefing.</u></p> <ul style="list-style-type: none"> <li>• Obtain a completed analysis of the incident; e.g., a Wildland Fire Situation Analysis (WFSA) for a wildland fire, or support the development of an analysis, a written Delegation of Authority, a copy of the most recent ICS Form 209, map(s) of the incident, and a completed ICS Form 201.</li> <li>• Complete the appropriate checklist for takeover of large incidents.</li> <li>• Get copies of current resource orders and those resources committed to incident.</li> <li>• Obtain key contact list with phone and fax numbers.</li> </ul>	W		
<p>5. <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		

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

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p>6. <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> <li>• Evaluate and replace or order positions in planning section, as needed.</li> </ul>	I		
<p>7. <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, type of incident, potential values to be protected, and jurisdictional involvement.</u></p>	I		
<p>8. <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; i.e., WFSA.</li> <li>• Identify current and potential problems and concerns.</li> <li>• Advise Incident Commander and other appropriate incident management team personnel.</li> </ul>	I		

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

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
9. <u>Supervise section.</u> <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		
10. <u>Establish and maintain incident planning cycle.</u> <ul style="list-style-type: none"> <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		
11. <u>Ensure that planning meeting location is well organized.</u> Required resources are in place prior to each meeting. <ul style="list-style-type: none"> <li>• Large ICS Form 215 and ICS Form 215A.</li> <li>• Large scale schematic map of incident.</li> <li>• Flip charts.</li> <li>• Felt tip markers.</li> <li>• Photos.</li> </ul>	I		

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**Continuation Sheet**

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

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
12. <u>Ensure that necessary support staff are aware of planning meeting assignments.</u> <ul style="list-style-type: none"> <li>• Situation Unit Leader has accurate and current incident, regional, and national situation status.</li> <li>• Resources Unit Leader has accurate and current status of resources on the incident as well as regionally and nationally.</li> <li>• Technical specialist input (Meteorologist, Fire Behavior Analyst, Structure Protection Specialist, etc.) is presented.</li> <li>• Arrangements are made for documentation and recording of applicable information.</li> </ul>	I		

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**Continuation Sheet**

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p>13. <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 [IC] identifies or approves objectives. The IC should address objectives or ask the Planning Section Chief 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 (WFSA for wildland fire 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 identifies incident control lines, values to be protected, division boundaries, and drop points; and prioritizes divisions in the event that choices must be made in allocating scarce resources, on map(s) visible to all attendees.</li> <li>• Ensure that Operations Section Chief identifies tactics, resources needed, and reporting/pickup locations and time by division/groups and that this information</li> </ul>	W		

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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>is properly displayed on ICS Form 215 or equivalent.</p> <ul style="list-style-type: none"> <li>• Compare resources needed to implement the Operations Section Chief's proposed 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>• Ensure LCES is incorporated into the planning process.</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., Safety Message, Communication Plan, Medical Plan, Air Operations Summary, Transportation Plan, and other special messages.</li> <li>• Conduct planning meeting in 30 minutes or less.</li> </ul>			

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**Continuation Sheet**

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

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
14. <u>Incident Action Plan (IAP)</u> <ul style="list-style-type: none"> <li>• Ensure planning staff completes required elements of the IAP within required timeframes.</li> <li>• Obtain elements from other appropriate sections within established timeframes.</li> <li>• Assemble the elements into an IAP.</li> <li>• Ensure the IAP meets incident objectives and is congruent with approved strategic plan; i.e., WFSA.</li> <li>• Develop contingency plan(s) as needed (evacuation/sheltering, structure protection, etc.).</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 and distributes appropriate copies of IAP to key people.</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 these individuals prior to the operational period briefing; e.g., air operations, ground support, food unit, supply unit, and agency dispatch.</li> </ul>	W		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
15. <u>Incident strategic plan</u> <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		
16. <u>Operational period briefings</u> <ul style="list-style-type: none"> <li>• Identify who needs to attend.</li> <li>• Post in conspicuous locations time of briefings, location, and required attendees.</li> <li>• Direct and participate in the operational period briefing, particularly emphasizing any changes from the written IAP.</li> </ul>	I		
17. <u>ICS Form 209, Incident Status Summary</u> <ul style="list-style-type: none"> <li>• Ensure ICS Form 209 is completed within established timeframes.</li> <li>• Review for accuracy and completeness, approve, sign, and submit to appropriate office.</li> <li>• Make sure priorities and special considerations are specified.</li> </ul>	I		
18. <u>Interact and coordinate with all command and general staff.</u>	I		

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**Continuation Sheet**

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

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
19. <u>Monitor incident status and develop alternative strategies.</u> <ul style="list-style-type: none"> <li>• Utilize technical specialists, operations personnel, and agency personnel.</li> <li>• Document and present potential alternative strategies to command and general staff.</li> <li>• Advise command and general staff of significant changes in incident status that affect them, in a timely manner.</li> </ul>	I		
20. <u>Coordinate incident rehabilitation needs.</u> <ul style="list-style-type: none"> <li>• Coordinate with responsible agencies.</li> <li>• Work with environmental specialists; e.g., Burned Area Emergency Rehabilitation Team, and keep updated on their activities.</li> </ul>	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
21. <u>Resource conditions and needs</u> <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		
22. <u>Ensure that 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>	I		
23. <u>ICS Form 214, Unit Log</u> <ul style="list-style-type: none"> <li>• Submit to the documentation unit completed and legible Unit Logs containing pertinent information for each operational period.</li> </ul>	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p><b><u>DEMOBILIZATION</u></b></p> <p>24. <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></p> <ul style="list-style-type: none"> <li>• Ensure demobilization plan is complete and signed.</li> <li>• Develop in coordination with command and general staff and agency dispatch.</li> <li>• Request all sections submit names or lists of surplus or potentially surplus personnel and resources to demobilization unit 48 hours in advance of them becoming surplus.</li> <li>• Schedule surplus resources and personnel for proper demobilization.</li> <li>• Implement approved demobilization plan and schedule.</li> </ul>	I		
<p>25. <u>Incident reports and narratives</u></p> <ul style="list-style-type: none"> <li>• Ensure all required incident reports and narrative are completed to agreed upon standards prior to leaving incident.</li> <li>• Properly assemble and file up-to-date incident records.</li> </ul>	I		
<p>26. <u>Debrief Agency Administrator.</u></p> <ul style="list-style-type: none"> <li>• Participate in debriefing.</li> </ul>	I		

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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, 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.**

### COMPLETE THESE ITEMS AT THE START OF THE EVALUATION PERIOD:

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

**Evaluator's home unit address and 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 for each task performed satisfactorily.

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

**Incident Kind:** Enter kind of incident, e.g., wildland fire, prescribed fire, search and rescue, flood, etc.

### COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

**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 trainee was evaluated. This block may indicate a span of time covering several small and similar incidents if the trainee has been evaluated on that basis, i.e., several initial attack fires in similar fuel types.

**Management Level or Prescribed Fire Complexity Level:** Indicates ICS organization level, i.e., Type 5, Type 4, Type 3, Type 2, Type 1, Area Command or prescribed fire complexity level (low, moderate, high).

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

<b>Grass Group</b>	1. Short Grass (1 foot)	<b>Timber Group</b>	8. Closed Timber Litter
	2. Timber (grass & understory)		9. Hardwood Litter
	3. Tall Grass (2-1/2 feet)		10. Timber (litter understory)
<b>Brush Group</b>	4. Chaparral (6 feet)	<b>Slash Group</b>	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:					
Name and Location of Incident or Simulation (agency & area)	Incident Kind (wildland fire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Prescribed Fire Complexity Level	NFFL Fuel Model(s)
			to		
The tasks initialed & dated by me have been performed under my supervision in a satisfactory manner by the above named trainee. I recommend the following for further development of this trainee. _____ The individual has successfully performed all tasks for the position and should be considered for certification. _____ The individual was not able to complete certain tasks (comments below) or additional guidance is required. _____ Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation. _____ The individual is severely deficient in the performance of tasks for the position and needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a trainee. Recommendations: _____ Date: _____ Evaluator's initials: _____ Evaluator's relevant red card (or agency certification) rating: _____					

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

## Evaluation Record (Continuation Sheet)

\_\_\_\_\_ **TRAINEE NAME** \_\_\_\_\_ **TRAINEE POSITION** \_\_\_\_\_

<b>#3</b>	Evaluator's name: Incident/office title & agency:				
Evaluator's home unit address & phone:					
Name and Location of Incident or Simulation (agency & area)	Incident Kind (wildland fire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Prescribed Fire Complexity Level	NFFL Fuel Model(s)
			to		
<p>The tasks initialed &amp; dated by me have been performed under my supervision 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. 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 needs further training (both required &amp; knowledge and skills needed) prior to additional assignment(s) as a trainee.</p> <p>Recommendations: _____</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:					
Name and Location of Incident or Simulation (agency & area)	Incident Kind (wildland fire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Prescribed Fire Complexity Level	NFFL Fuel Model(s)
			to		
<p>The tasks initialed &amp; dated by me have been performed under my supervision 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. 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 needs further training (both required &amp; knowledge and skills needed) prior to additional assignment(s) as a trainee.</p> <p>Recommendations: _____</p> <p>Date: _____ Evaluator's initials: _____ Evaluator's relevant red card (or agency certification) rating: _____</p>					