|  |  |  |
| --- | --- | --- |
| IQCS Pic | Incident Qualification and CertificationIndividual Employee Update | (Note: this form is to be used only for updating employee records that are already established in the IQCS) |

|  |
| --- |
| Header Information for R2 USFS Employees |
| First Name |  |  |  |
| Last Name |  | Employment Kind (Career, Career Seasonal, Casual Hire, Temporary, Volunteer)  |  |
| Middle Initial |  | Fitness Rating (Arduous, Moderate, Light, None) |  |
| Employee Number (IQCS # - ok to leave blankif you don’t know it.) | *upper right of qual card* | Fitness Date (MM/DD/YYYY) |  |
| Org Code | **02000000** | Group (IMT Member and Team name)  |  |
| Unit ID(example: CO-R02) | **CO-R02** | IRDP Incident Responder Development Plan (Y/N)  |  |
| OPM Job Code(example, 0401 or 0462) |  | Salary plan/Grade(GS, WG,WL, WS, AD, ES, EM)  |  |

|  |
| --- |
| Incident Qualification Card *(only the jobs qualified for or having had a PTB started/completed)* |
| Qualified Jobs | Trainee Jobs |
| Job Code | Job Code | Job Code | Job Code |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| JOB CODE = Four digit code for the job performed (ex.: **FFT2** = Firefighter Type 2) |

Training administered within IQCS will automatically be applied to the individual’s record when the course session is completed

|  |
| --- |
| Employee Training Entry (Documentation Required) |
| Course Code (S261) | Date Completed (MM/DD/YYYY)  | Course Code (S260) | Date Completed (MM/DD/YYYY) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| EMPLOYEE SIGNATURE |  | DATE |  |
| **SUPERVISOR** |  | **DATE** |  |

|  |
| --- |
| EMPLOYEE WILDLAND AND PRESCRIBED FIRE EXPERIENCE |
| **(Mandatory)**JobCode(Incident Position) | Type of Incident (Event Code) | **(Mandatory)**Incident ArrivalDateMM/DD/YY | State | **(Mandatory)**OperationalPeriods Shifts/days | Management Type or ComplexityLevel(See Below) | Fuel Type(See Below) | Fire Size Class(See Below) | **(Mandatory)**Incident Order #Incident Name(Resource Order) Request #(Fire code/ Fire number okay) |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| ICS Management Types | Complexity Levels | Fuel Type/ Model #(select primary carrier code **1**-**4**) | Fire Sizes (in acres) |
| **TYPE A -** national area command team assigned**TYPE 1** - national type 1 team assigned**TYPE 2** - regional type 2 team assigned**TYPE 3** - extended attack with multiple resources**TYPE 4** - initial attack**TYPE 5** - initial attack with very few resources | **TYPE 1****TYPE 2****TYPE 3**(For Prescribed Fires) | **1** – grass/1-3**2** – shrub/4-7**3** – timber/8-10**4** – slash/11-13 | **A****B****C****D****E****F****G** |  .1 - .25 .26 - 9.9 10 - 99.9 100 - 299.9 300 - 999.91,000 - 4,999.9 5,000 + |

|  |
| --- |
| Instructor Experience Entry |
| Course Code (S261) | Course Start Date (MM/DD/YY)  | Instructor LevelL=lead U=unit | IQCS Session # (If Applicable) /Course Location (Training Facility Name)/Course Coordinator (if known) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Task Books

|  |
| --- |
| Initiated, *But Not Completed* |
| **Event Code** | **Job Code** | **Initiated Date & by whom** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| Initiated *And* Completed (1 column per Task Book) |
| *Job Code, and Initiated Date* | *Job Code, and Initiated Date* | *Job Code, and Initiated Date* |
| ***Final Evaluator*** | **Final Evaluator** | **Final Evaluator** |
| *Title* | Title | Title |
| *Home Unit* | Home Unit | Home Unit |
| *Phone Number* | Phone Number | Phone Number |
| ***Agency Certifier*** | **Agency Certifier** | **Agency Certifier** |
| *Title* | Title | Title |
| *Home Unit* | Home Unit | Home Unit |
| *Phone Number* | Phone Number | Phone Number |
| Certification Date | Certification Date | Certification Date |
| Agency Move / Transfer Affiliations:*From Agency - To Agency* | Time at first agency:*How long worked at From Agency* | Date changes:*Transfer/Hire - Month & Year of Move* |
| Example:*USFS to BLM* | Example:*8 seasons* | Example:*BLM Hire May 1990* |
| Example:*NPS to USFS* | Example:*3 years* | Example:*Transferred July 2000* |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Above information needed for Audits of fire qualifications of New Hires, Transferred Employees (any) and Rehires.**

**Information needed to show previous qualifications, include military time when your MOS was in a position that may show qualifications for your present position.**

Any other information that may be helpful to your training officer: