**Optional Position Task Book Review Form**

This is an optional form to be completed by the employee and the supervisor prior to submission to the FQRC.

Attach the original task book to this sheet for review.

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| **Name:** |  |
| **Forest/District:** |  |
| **Review Date:** |  |
| **Training Position:** |  |
| **Taskbook Initiated:**(MM/YY; BY WHOM) |  |
| **First Assignment:****(MM/YY)** |  |

|  |
| --- |
| **TRAINING** |
| Required Training Courses: | Completed mm/yy | \*\*Certificate on File? |
|  |  | [ ] YES [ ] NO |
|  |  | [ ] YES [ ] NO |
|  |  | [ ] YES [ ] NO |
|  |  | [ ] YES [ ] NO |
|  |  | [ ] YES [ ] NO |
|  |  | [ ] YES [ ] NO |

|  |
| --- |
| **PREREQUISITE POSITION(S)** |
|  | Date Certified mm/yy |
|  |  |
|  |  |

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| **TASKBOOK POSITION PERFORMANCE ASSIGNMENTS:** |
| Date | Incident Name/Location | Evaluator’s Name |
|  |  |  |
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| **FINAL EVALUATOR** |
| Date | Incident Name/Location | Evaluator’s Name |
|  |  |  |

\*\*If no certificate is on file, explain in notes i.e. copy of class completion roster, SF-182 or instructor documentation