Incident Qualifications and Certification (IQCS)
Individual Responder Update

This information is to be used only for updating federal employee records that are already established in the IQCS.

Responder Information			
First Name		**Unit ID**	
Last Name		**Org ID**	
Middle Initial		**Work Phone**	
IQCS Empl ID		**Work Email**	

Incident Experience

	Job Code *Incident Position*	Qual Status *Q or T*	Event Kind *See Below*	Arrival Date *MM/DD/YY*	Ops Periods *Shifts*	Mgmt Level *See Below*	Fuel Type *See Below*	Fire Size *See Below*	Incident / Project Number	Incident / Project Name	State
EXAMPLE	*HECM*	*T*	*WF*	*08/05/11*	*3*	*3*	*G*	*C*	*FL-FNF-013016*	*Grassy Prairie 43*	*FL*
1											
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Event Kind *Commonly Used Listed Below* *For complete list visit NWCG Event Kind & Category*		Management Levels *NWCG Management Complexity Levels*		Fuel Type / Model *Primary*		Fire Size *Acres*	
SU	Incident/Event Support	**1**	Type 1 Incident	**G**	Grass/1-3	**A**	.1 - .25
PP	Preparedness/Preposition	**2**	Type 2 Incident	**T**	Timber/8-10	**B**	.26 - 9.9
RX	Prescribed Fire	**3**	Type 3 Incident	**B**	Brush/4-7	**C**	10 - 99.9
WF	Wildfire	**4**	Type 4 Incident	**S**	Slash/11-13	**D**	100 - 299.9
WL	Wildland Search/Rescue/Recovery	**5**	Type 5 Incident			**E**	300 - 999.9
LE	Law Enforcement					**F**	1,000 - 4,999.9
MA	Medical Assist	**1**	Type 1 Prescribed Fire			**G**	5,000 +
FL	Flooding	**2**	Type 2 Prescribed Fire				
CT	Classroom Training	**3**	Type 3 Prescribed Fire				
JT	On-The-Job Training						
PC	Proficiency & Currency Event						
SI	Simulation						

Incident Qualification Card						
Qualified Positions					Trainee Positions	

Position Taskbooks			
Job Code	Position Title	Date Initiated *MM/DD/YY*	Status

Training Documentation Required			
Course Code	Course Title	Start Date *MM/DD/YY*	Date Completed *MM/DD/YY*

Licenses and Certifications Documentation Required			
Licenses/Certificate Code	Licenses/Certificate Title	Issue Date *MM/DD/YY*	Expiration Date *MM/DD/YY*

Instructor Experience			
Course Code	Course Start Date *MM/DD/YY*	Instructor Level *Lead, Unit, Coach*	IQCS Session # / Course Location / Course Coordinator

Responder Signature		**Date**	
Supervisor Signature		**Date**	