



# IQCS New Responder

Responder added to IQCS by: \_\_\_\_\_ Date: \_\_\_\_\_

**Do you have previous fire qualification card?**

If yes w/federal employment, include IQCS Empl ID (found in upper right-hand corner of Qual Card). \_\_\_\_\_

If yes w/state/local employment, include IQS Account Mrg Name and email address  
\_\_\_\_\_

## Employee Information

**New EmplID**

<b>Legal Name:</b> _____			
First Name	M.I.	Last Name	Suffix
<b>Home Address:</b> _____			
City:	State:	Postal:	
<b>Mail Address:</b> _____			
City:	State:	Postal:	
<b>Work Number:</b> _____	<b>Home Number:</b> _____		
<b>Mobile Number:</b> _____	<b>Other:</b> _____		
<b>Work Email:</b> _____	<b>Personal E-mail:</b> _____		
<b>Other:</b> _____			
<b>Date of Birth:</b> _____	<b>Empower HR ID (USFS only):</b> _____		

## Work Location

<b>Agency:</b> _____	<b>Org Code:</b> _____	<b>Unit ID:</b> _____
<b>Organization Name:</b> _____		
<b>Supervisor's Name:</b> _____		
<b>Admin Location Address:</b> _____		<b>City, State</b> _____
<b>Duty Station Location Address:</b> _____		<b>City, State</b> _____

## OPM Job Information

<b>OPM Job Code:</b> _____	<b>Full/Part:</b> _____
<b>Employment Kind:</b> _____	<b>Salary Plan:</b> _____ <b>Grade:</b> _____
<b>IFPM Position (Y/N)</b> _____	<b>IFPM Position Name:</b> _____