**Task Book Review Form**

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| --- | --- | --- |
| Employee: | Task book: | District/Field Office: |

***To be filled out by committee member***

Evaluation Summary

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Incident Name | Complexity (Type 1-5) | Fire Location  ST/UNIT | Dates of Assignment | # of  shifts | Fuel Type For Ops  (Grass, Brush, Timber, Slash) | Evaluator |
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| --- | --- | --- | --- | --- | --- |
| Has an assignment been completed off unit? | Yes/No | | Where: | |  |
| For operations positions, what fuel types have been encountered? | | | Grass Brush Timber Slash | | |
| If for DIVS, has IMT1 or 2 assignment been completed? | | Yes/No | Fire: |  | |
| If for FFT1, has hand crew assignment been completed? | | Yes/No | Fire: |  | |
| For Faller positions are evaluators at the appropriate level? | | Yes/No |  |  | |
| FAL3 evaluators: FAL2 or FAL1; Final evaluator; FAL2 or FAL1  FAL2 evaluators: FAL2 or FAL1; Final evaluator: FAL2 or FAL1  FAL1 evaluators: FAL1; Final evaluator FAL1 evaluator | | | | | |

***To be verified by IQCS Account Manager***

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| --- | --- | --- | --- | --- | --- |
| All required training has been completed? | ***Yes*** |  | ***No*** |  | If no, what is missing? |
| All required training certificates are on file? | ***Yes*** |  | ***No*** |  | If no, what is missing? |

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| --- | --- | --- | --- | --- |
|  |  | Approved | |  |
| Date of Review: |  | Yes | No | Comments |
| IQCS Account Manager | Noni Dalton |  |  |  |
| FMO | Josh Tibbetts |  |  |
| AFMO | Robert Lopez |  |  |
| FOC | Jeff Bergfeld |  |  |
| FOS Cedar City | Colt Coates |  |  |
| FOS St. George/Kanab/GSENM | Vacant |  |  |
| FOS Richfield | Vacant |  |  |
| Aviation Unit Manager | Glenn Dietz |  |  |
| District Fuels Manager | Shawn Peterson |  |  |
| CCIFC Center Manager | Tina Greenhalgh |  |  |