**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 LocationST/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 FAL1FAL2 evaluators: FAL2 or FAL1; Final evaluator: FAL2 or FAL1FAL1 evaluators: FAL1; Final evaluator FAL1 evaluator |

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 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 |  |  |