

**ROCKY MOUNTAIN AREA (RMA) INCIDENT MANAGEMENT TEAM
Incident Commander and Deputy Incident Commander Application Form**

DUE DATE: September 15, 2017

Individuals interested in applying to the Rocky Mountain Area (RMA) to serve as an Incident Commander (ICT1 or ICT2), or Deputy Incident Commander (D-ICT1 or D-ICT2) must complete this Rocky Mountain Incident Management Application Form. All applications must be approved by the applicant's immediate supervisor, including any other required local agency approvals, and be submitted through respective agency channels to their agency's Rocky Mountain Area Operations Committee representative.

INCOMPLETE OR LATE APPLICATIONS MAY NOT BE CONSIDERED

APPLICANT BASIC INFORMATION:

Applicant Name: _____ Agency & Unit: _____
 Office Phone: _____ Cell Phone: _____
 Office E-mail: _____ Employment Type*: _____
 (*i.e. permanent, seasonal, AD, supplemental)

POSITION(S) APPLIED: (Enter only one Position per line)

PREFERENCE	POSITION (ICT1, Deputy ICT1, ICT2, Deputy ICT2)
1	
2	
3	
4	

AVAILABILITY: Applicant availability is critical to the success of all Incident Management Teams. Submitting this application signifies a commitment to be available for the 2018-2020 Incident Management assignments. Do you foresee any significant barriers to your availability?
 No Yes

If Yes, explain: _____

ALL-HAZARD PARTICIPATION: In the event of a Presidential Disaster Declaration to an emergency situation, a Stafford Act All-Hazard response may require RMA IMTs to assistance in a disaster. Do you foresee any significant barriers to your availability for Stafford Act All-Hazard responses?
 No Yes

If Yes, explain: _____

APPLICANT SIGNATURE:

Applicant _____ Date: _____
Signature

SUPERVISORY APPROVALS:

I concur with the goals, commitment, and availability of the applicant for the position(s) applied.

Immediate Supervisor _____ Date: _____
Print Title Signature

Applicant or Supervisor Remarks: (If any) _____

REVIEWER CHECKLIST:

Are the following items completed on this form?

- Applicant Basic Information, Position(s) Applied, Availability, and All-Risk Participation
- Applicant signature, Immediate Supervisor approval signature, Agency Approval signature (if required)

Are the following items included with this application?

- Current Incident Training & Experience Record or copy of current Incident Qualification Card documenting qualification for positions applied.
- Completed 2018 RMA IC/Deputy IC KSAs

REVIEW AND REFERAL:

I have reviewed this application and the candidate is qualified for the position(s) which have been applied for as a Primary, Job-Share, and/or in Trainee Status.

Agency Approval
(If Required by Submitting Agency) _____ Date: _____

Rocky Mountain Area Operations
Committee Agency Representative _____ Date: _____