

How to properly complete a task book

Demonstrated Performance

Initiate the Task Book

1. Initiated by the Person Responsible for the Supervising the Individual
2. Requires that all information be complete and dated.

A Publication of the
National Wildfire
Coordinating Group



NWCG Task Book for the Positions of:

PLANNING SECTION CHIEF TYPE 2
(PSC2)

PLANNING SECTION CHIEF TYPE 1
(PSC1)

(POSITION PERFORMANCE REQUIRED ON A WILDFIRE ASSIGNMENT)

PMS 311-23

JUNE 2009

Task Book Assigned To:

Trainee's Name: _____

Home Unit/Agency: _____

Home Unit Phone Number: _____

Task Book Initiated By:

Official's Name: _____

Home Unit Title: _____

Home Unit/Agency: _____

Home Unit Phone Number: _____

Home Unit Address: _____

Date Initiated: _____

The material contained in this book accurately defines the performance expected of the position for which it was developed. This task book is approved for use as a position qualification document in accordance with the instructions contained herein.


INCIDENT/EVENT CODING

Each task has a code associated with the type of training assignment where the task may be completed. The codes are: O = other, I = incident, W = wildfire, RX = prescribed fire, W/RX = wildfire OR prescribed fire and R = rare event. The codes are defined as:

- O = Task can be completed in any situation (classroom, simulation, daily job, incident, prescribed fire, etc.).
- I = Task must be performed on an incident managed under the Incident Command System (ICS). Examples include wildland fire, structural fire, oil spill, search and rescue, hazardous material, and an emergency or non-emergency (planned or unplanned) event.
- W = Task must be performed on a wildfire incident.
- RX = Task must be performed on a prescribed fire incident.
- W/RX = Task must be performed on a wildfire OR prescribed fire incident.
- R = Rare events such as accidents, injuries, vehicle or aircraft crashes occur infrequently and opportunities to evaluate performance in a real setting are limited. The evaluator should determine, through interview, if the trainee would be able to perform the task in a real situation.

While tasks can be performed in any situation, they must be evaluated on the specific type of incident/event for which they are coded. For example, tasks coded W must be evaluated on a wildfire; tasks coded RX must be evaluated on prescribed fire and so on. Performance of any task on other than the designated assignment is not valid for qualification.

signed off as successfully completed. These codes are arranged in the following hierarchy:

Hierarchy	Code	Definition
Highest 	D - 1 D - 2 D - 3	Declared Disaster (Stafford Act incident which includes Major Disaster and Emergency Declarations).
	I	A Non-Stafford Act Incident (i.e., Federal to Federal Support; FEMA is not the lead Federal agency). This includes pre-declaration surge activities.
Lowest	E	An event, such as a National Special Security Event (NSSE) OR an organized, pre-planned exercise or simulation approved by the Certifying Official or higher authority.

A task may be signed off at the specified level or at any higher level.

Disasters are classified as Level I, II, or III with Level I representing the largest and most complex. In this PTB these levels are associated with the “D” in the code column. Each task has one of the above codes listed in the Code column associated with the task.

Texas IMT All-Hazard Event Identifiers

- Code: O = task can be completed in any situation (classroom, simulation, incident, daily job, etc.)
I = task must be performed on an incident
R = rare event – the evaluation assignment may not provide opportunities to demonstrate performance. The evaluator may be able to determine skills/knowledge through interview or the home office may need to arrange for another assignment or a simulation.

	Record #	Initials/Date
<p>14. Interact and coordinate with command staff, general staff and appropriate unit leaders.</p> <ul style="list-style-type: none"> • <i>Receive and transmit current and accurate information.</i> • <i>Communicate changes to the Incident Action Plan (IAP) or relevant plan.</i> • <i>Ensure the Resource Unit Leader is advised of changes in status of resources assigned to the operation. Keep status current.</i> 	I	
<p>15. Coordinate incident rehabilitation needs with responsible agencies and environmental specialists.</p> <ul style="list-style-type: none"> • <i>Fire Suppression Rehabilitation</i> • <i>Burned Area Emergency Response</i> 	W	



Behavior/Activity: Ensure that organizational structure and staffing are adequate to meet immediate supervisor's direction			
Competency: Manage Resources (C19); Planning & Organizing (C20)			
TASK	CODE	RECORD NUMBER	EVALUATOR INITIALS
58. Determine if organizational structure is appropriate. <ul style="list-style-type: none"> • Size and complexity of the incident • Support needs of other functions • Coordination needs at the State level • Incident objectives and immediate supervisor direction • Emergency Support Functions (ESF) assigned • Coordination needs at the State and Local level 	D-3		
59. Ensure organizational structure is ICS compliant. <ul style="list-style-type: none"> • Span of control • Unity of Command • Proper ICS positions 	D-3		

Common Tasks for All Single Resource Bosses

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
18. Follow safety guidelines. <ul style="list-style-type: none"> Inform subordinates of hazards. Develop plans based on safety guidelines. Ensure tactical operations maintain the principles of Lookouts, Communication, Escape Routes, Safety Zones (L.C.E.S). Ensure work/rest guidelines are met. 	1	#1 RF #2 RF #3 RF #5 RF #7 BK	02-01-17 SC 3-26-18 02-03-17 02-13-17 5/5/17 BK 10/20/17
Behavior: Establish work assignments and performance expectations, monitor performance, and provide feedback.			
19. Complete daily review of staffing requirements.	1	#3 JS #4	RF 02-13-17 JS/17 DB 3-10-17
20. Develop schedule/assignments based on Incident Action Plan (IAP) or relevant plan.	1	#1 JS #4	RF 02-01-17 JS/17 DB 3-10-17
21. Ensure subordinates understand assignment for operational period. <ul style="list-style-type: none"> Provide clear, concise instructions and allow for feedback. 	1	#1 JS #2 JS #4 JS	RF 02-01-17 JS/17 RF 02-03-17 BK 10/20/17 DB 3-10-17 SC 3-26-18
22. Continually evaluate performance. <ul style="list-style-type: none"> Communicate deficiencies immediately and take corrective action. Provide training opportunities where available. Complete personnel performance evaluations according to agency guidelines. 	1	#1 #2 #5 #7 #8	RF 02-01-17 RF 02-03-17 JS 5/5/17 BK 10/20/17 SC 3-26-18
Behavior: Emphasize teamwork.			
23. Establish crew cohesiveness. <ul style="list-style-type: none"> Provide for open communication Seek commitment Set expectations for accountability Focus on the team result. 	1	#1 #2 #3 #4 #5 #7 #8	RF 02-01-17 RF 02-03-17 RF 02-13-17 DB 3-10-17 JS 5/5/17 BK 10/20/17 SC 3-26-18

Good Example of Tasks:

- Although it is not required, it is **highly recommended** to have the evaluator initial by each task that is completed even if previously initialed.
- This example shows multiple signatures in each box, demonstrating that the trainee was evaluated for each task more than once.
- Notice how each task is initialed and dated as well.

Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.

Common Tasks for FFT1 and ICT5

Competency: Communicate effectively.

Description: Use suitable communication techniques to share relevant information with appropriate personnel on a timely basis to accomplish objectives in a rapidly changing, high-risk environment.

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
Behavior: Ensure relevant information is exchanged during briefings and debriefings.			
23. Obtain tactical assignment from supervisor following the IRPG briefing checklist. • <i>Special considerations and hazards.</i> • <i>Values to be protected.</i>	I	#5 #6	SF 1/31/18 PBB 4-5-18
24. Brief subordinates or relief personnel periodically and with every change from planned work. • <i>Communications</i> • <i>Chain of command</i> • <i>Overall assignment information</i>	I	#6	PBB 4-5-18
25. Participate in After Action Reviews (AAR).	I	#3	SC 9/15/17
Behavior: Ensure documentation is complete and disposition is appropriate.			
26. Complete required documentation. • <i>Employee time report</i> • <i>Accidents and injuries reports</i> • <i>ICS 214, Unit Log</i>	O	#3	SC 9/15/17
27. Assist with preparation of necessary reports and records.	O	#3	SC 9/15/17
Behavior: Communicate and ensure understanding of work expectations within the chain of command and across functional areas.			
28. Keep assigned crew members informed on a continuing basis about pertinent information.	W/RX	#6	PBB 4-5-18
29. Maintain communication with adjoining resources.	W/RX	#2	ANU 8/2/17

Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.

- This **DOES** meet the minimum requirements required to submit the task book.
- However, showing just one signature per task does not look as strong as having multiple signatures.
- It is a realization as well that some tasks are more difficult to obtain more than one signature, but multiple signatures per task should be obtained as often as possible.

Evaluation Record #

Each evaluator will need to complete an evaluation record. Each evaluation record should be numbered sequentially. Place this number at the top of the evaluation record page and also use it in the column labeled “Evaluation Record #” for each numbered task the trainee has satisfactorily performed.

Trainee Information

Print the trainee’s name, position on the incident/event, home unit/agency, and the home unit/agency address and phone number.

Evaluator Information

Print the Evaluator’s name, position on the incident/event, home unit/agency, and the home unit/agency address and phone number.

Incident/Event Information

Incident/Event Name: Print the incident/event name.

Reference: Enter the incident code and/or fire code.

Duration: Enter inclusive dates during which the trainee was evaluated.

Incident Kind: Enter the kind of incident (wildfire, prescribed fire, search and rescue, flood, hurricane, etc.).

Location: Enter the geographic area, agency, and state.

Management Type or Prescribed Fire Complexity Level: Circle the ICS organization level (Type 5, Type 4, Type 3, Type 2, Type 1, Area Command) or the prescribed fire complexity level (Low, Moderate, High).

FEMA

3. **The Evaluator** is responsible for:
 - Being qualified in the position being evaluated.

4. **The Final Evaluator** is the evaluator of the trainee when the final tasks in the PTB are completed. If only one evaluator signs off on all of the tasks in the PTB, then that individual is also the final evaluator. This individual will ensure that all tasks have been initialed and is responsible for:

NWCG and Texas AHIMT

Evaluator's Relevant Qualification (or agency certification)

List your qualification or certification relevant to the trainee position you supervised.

Note: Evaluators must be either qualified in the position being evaluated or supervise the trainee; Final Evaluators must be qualified in the trainee position they are evaluating.

Printed Name DREW LIDDELL
Trainee Position on Incident/Event: HEQB(+)
Home Unit/Agency: FREDERICKSBURG/TFS
Home Unit/Agency Address and Phone Number: 100 BUSINESS CRT-FPS TX 78624 / 830-977-5426

Printed Name RICKY HOLBROOK
Evaluator Position on Incident/Event: TFLD
Home Unit/Agency: LIVINGSTON TX /TFS
Home Unit/Agency Address and Phone Number: TFS, 2500 HWY, 90 E. LIVINGSTON, TX 77351

Incident/Event Information
Incident Event Name: GRAVEL PIT Reference (Incident Number Fire Code): TX-TKS-18902
Duration: 3/15/18 - 8 HOURS
Incident Kind: Walden, Prescribed Fire, All Hazard, Other (specify):
Location (include Geographic Area, Agency, and State): PAW - HANDLE, AMARILLO, TFS
Management Type (circle one): Type 5, Type 3, Type 2, Type 1, Area Command
OR Prescribed Fire Complexity Level (circle one): Low, Moderate, High
FBPS Fuel Model Letter: C - Grass, B - Brush, T = Timber, S = Slash

Evaluator's Recommendation
(Initial only one line as appropriate)
pr
✓ 1) The tasks initiated and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. The trainee has successfully performed all tasks in the PTB for the position. I have completed the Final Evaluator's Verification section and recommend the trainee be considered for agency certification.
_____ 2) The tasks initiated and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. However, opportunities were not available for all tasks (or all uncompleted tasks) to be performed and evaluated on this assignment. An additional assignment is needed to complete the evaluation.
_____ 3) The trainee did not complete certain tasks in the PTB in a satisfactory manner and additional training, guidance, or experience is recommended.
_____ 4) The individual is severely deficient in the performance of tasks in the PTB for the position and additional training, guidance, or experience is recommended prior to another training assignment.

Record additional remarks/recommendations on an Individual Performance Evaluation, or by attaching an additional sheet to the evaluation record.
Evaluator's Signature: Ricky Holbrook Date: 4-6-18
Evaluator's Relevant Qualification (or agency certification): TFLD, SOFC, DIVS

Additional Evaluation Record Sheets can be downloaded at <http://www.nwcg.gov/publications/positions-taskbooks>

NWCG GOOD – Initial Attack Fire

- Notice all sections have been filled in completely, some evaluation pages may of may not have the comments section.
- The Incident / Event Information listed specifically what fire was evaluated and exactly what the duration was. If it was a one day event.
- The location was specified to what Region/Branch is was. Do NOT simply list TX. List the responsible agency as well.
- Notice the Incident Kind and Management Type match.
- When identifying the fuels by circling the model type, it is okay to write out what specifically they were. It paints a better picture of experience.
- Carefully review and mark the appropriate Evaluator's Recommendation.
- Remember to have your Evaluator sign and date the rating.



BAD Example

Evaluation Record # 3

Trainee Information

Printed Name:
Trainee Position on Incident/Event:
Home Unit/Agency:
Home Unit /Agency Address and Phone Number:

Evaluator Information

Printed Name: Jane Smith
Evaluator Position on Incident/Event: HEQB
Home Unit/Agency:
Home Unit /Agency Address and Phone Number:

Incident/Event Information

Incident/Event Name: Fire Reference (Incident Number/Fire Code):
Duration:
Incident Kind: Wildfire, Prescribed Fire, All Hazard, Other (specify):
Location (include Geographic Area, Agency, and State):
Management Type (circle one): Type 5, Type 4, Type 3, Type 2, Type 1, Area Command
QB Prescribed Fire Complexity Level (circle one): Low, Moderate, High
FBPS Fuel Model Letter: G = Grass, B = Brush, T = Timber, S = Slash

Evaluator's Recommendation
(Initial only one line as appropriate)

- _____ 1) The tasks initialed and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. The trainee has successfully performed all tasks in the PTB for the position. I have completed the Final Evaluator's Verification section and recommend the trainee be considered for agency certification.
- _____ 2) The tasks initialed and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. However, opportunities were not available for all tasks (or all uncompleted tasks) to be performed and evaluated on this assignment. An additional assignment is needed to complete the evaluation.
- _____ 3) The trainee did not complete certain tasks in the PTB in a satisfactory manner and additional training, guidance, or experience is recommended.
- _____ 4) The individual is severely deficient in the performance of tasks in the PTB for the position and additional training, guidance, or experience is recommended prior to another training assignment.

Record additional remarks/recommendations on an Individual Performance Evaluation, or by attaching an additional sheet to the evaluation record.

Evaluator's Signature: _____ Date: _____
Evaluator's Relevant Qualification (or agency certification): HEQB

Additional Evaluation Record Sheets can be downloaded at www.nwcc.gov/pms/taskbook/taskbook.htm

NWCG BAD EXAMPLE

- Missing basic information throughout.
- Duration is listed as a year and not as specific dates tied to specific events. Multiple events listed but not related. These should be different evaluations and broken down with specifics.
- Durations should not last longer than one month. If the event / incident lasts longer than one month, a new evaluation should be used.
- Evaluator's recommendations need to be completed. This helps the next evaluator and also during taskbook review.
- The evaluator's signature date is before the end of the duration date. Only dates actually observed by the evaluator should be listed.

All Hazard Task Book Evaluation Form

TRAINEE NAME		TRAINEE POSITION		
#1	Evaluator's name: Incident/office title & agency:			
Evaluator's home unit address & phone:				
Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	
			to	
The tasks initiated & dated by me have been performed under my supervision in a satisfactory manner by the above named Trainee. I recommend the following for further development of this Trainee: <input type="checkbox"/> The individual has successfully performed all tasks for the position and should be considered for certification. <input type="checkbox"/> The individual was not able to complete certain tasks (comments below) or additional guidance is required. <input type="checkbox"/> Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation. <input type="checkbox"/> The individual is severely deficient in the performance of tasks for the position and needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.				
Recommendations: _____				
Date: _____ Evaluator's initials: _____				
Evaluator's relevant agency certification or rating: _____				
#2	Evaluator's name: Incident/office title & agency:			
Evaluator's home unit address & phone:				
Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	
			to	
The tasks initiated & dated by me have been performed under my supervision in a satisfactory manner by the above named Trainee. I recommend the following for further development of this Trainee: <input type="checkbox"/> The individual has successfully performed all tasks for the position and should be considered for certification. <input type="checkbox"/> The individual was not able to complete certain tasks (comments below) or additional guidance is required. <input type="checkbox"/> Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation. <input type="checkbox"/> The individual is severely deficient in the performance of tasks for the position and needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.				
Recommendations: _____				
Date: _____ Evaluator's initials: _____				
Evaluator's relevant agency certification or rating: _____				

All-Hazard Incident Commander

June 15, 2009

INSTRUCTIONS FOR COMPLETING THE EVALUATION RECORD

There are four separate blocks allowing evaluations to be made. These evaluations may be made on incidents, simulations in classroom, or in daily duties, depending on what the position task book indicates. This should be sufficient for qualification in the position if the individual is adequately prepared. If additional blocks are needed, a page can be copied from a blank task book and attached.

COMPLETE THESE ITEMS AT THE START OF THE EVALUATION PERIOD:

Evaluator's name, incident/office title, and agency: List the name of the Evaluator, his/her incident position or office title, and agency.

Evaluator's home unit address and phone: Self-explanatory

#: The number next to the evaluator's name in the upper left corner of the evaluation record identifies a particular incident or group of incidents. This number should be placed in the column labeled "Evaluation Record #" on the PTB for each task performed satisfactorily. This number will enable reviewers of the completed PTB to ascertain the qualifications of the different evaluators prior to making the appropriate sign-off on the PTB.

Location of Incident/Simulation: Identify the location where the tasks were performed by agency and office.

Incident Kind: Enter kind of incident; e.g., hazmat, wildland fire, structural fire, search and rescue, flood, tornado, etc.

COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

Number and Type of Resources: Enter the number of resources and types assigned to the incident pertinent to the Trainee's task book position.

Duration: Enter inclusive dates during which the Trainee was evaluated. This block may indicate a span of time covering several small and similar incidents if the Trainee has been evaluated on that basis; e.g., several initial attack wildfires in similar fuel types.

Recommendation: Check as appropriate and/or make comments regarding the future needs for development of this trainee.

Date: List the date the record is being completed.

Evaluator's initials: Initial here to authenticate your recommendations and to allow for comparison with initials in the PTB.

Evaluator's relevant certification: List your certification relevant to the Trainee position you supervised.

INCIDENT PERSONNEL PERFORMANCE RATING		INSTRUCTIONS: The immediate job supervisor will prepare this form for each subordinate. It will be delivered to the planning section before the rater leaves the fire. Rating will be reviewed with employee who will sign at the bottom.											
THIS RATING TO BE USED ONLY FOR DETERMINING AN INDIVIDUAL'S PERFORMANCE													
1. Name		2. Fire Name and Number											
3. Home Unit (address)		4. Location of Fire (address)											
5. Fire Position	6. Date of Assignment From: _____ To: _____	7. Acres Burned	8. Fuel Type(s)										
9. Evaluation													
Enter X under appropriate rating number and under proper heading for each category listed. Definition for each rating number follows.													
0 - Deficient. Does not meet minimum requirements of the individual statement. DEFICIENCIES MUST BE IDENTIFIED IN REMARKS.													
1 - Needs to improve. Meets some or most of the requirements of the individual element. IDENTIFY IMPROVEMENT NEEDED IN REMARKS.													
2 - Satisfactory. Employee meets all requirements of the individual element.													
3 - Superior. Employee consistently exceeds the performance requirements.													
Rating Factors		Hot Line		Mop-Up		Camp		Other (Specify)					
		0	1	2	3	0	1	2	3	0	1	2	3
Knowledge of the job													
Ability to obtain performance													
Attitude													
Decisions under stress													
Initiative													
Consideration for personnel welfare													
Obtain necessary equipment and supplies													
Physical ability for the job													
Safety													
Other (specify)													
10. Remarks													
11. Employee (signature) This rating has been discussed with me											12. Date		
13. Rate By (signature)				14. Home Unit (address)				15. Position of Fire				16. Date	

ICS-225 WF – Incident Performance Rating

- All of the information needs to be filled out. To often there are numerous blanks on this form and it will have to be sent back to be completed.
- Only list ONE position being evaluated.
- BOTH the person being rated and the rater need to sign this form or it will be sent back.
- This form is wildfire specific, please use this for wildfire or prescribed burn events instead of the FEMA one. On other all-hazard events the FEMA ICS-225 is acceptable.
- Trainee performance should be thoroughly documented in the notes section in addition to the column ratings. The trainee will benefit if they know what they are doing correctly or what needs to be improved.

FEMA ICS 225

INCIDENT PERSONNEL PERFORMANCE RATING (ICS 225)

THIS RATING IS TO BE USED ONLY FOR DETERMINING AN INDIVIDUAL'S PERFORMANCE ON AN INCIDENT/EVENT							
1. Name:		2. Incident Name:		3. Incident Number:			
4. Home Unit Name and Address:			5. Incident Agency and Address:				
6. Position Held on Incident:	7. Date(s) of Assignment: From: To:	8. Incident Complexity Level: 1 2 3 4 5	9. Incident Definition:				
10. Evaluation							
Rating Factors	N/A	1 – Unacceptable	2	3 – Met Standards	4	5 – Exceeded Expectations	
11. Knowledge of the Job/ Professional Competence: Ability to acquire, apply, and share technical and administrative knowledge and skills associated with description of duties. (Includes operational aspects such as marine safety, seamanship, seamanship, SAR, etc., as appropriate.)	<input type="checkbox"/>	Questionable competence and credibility. Operational or specialty expertise inadequate or lacking in key areas. Made little effort to grow professionally. Used knowledge as power against others or bluffed rather than acknowledging ignorance. Effectiveness reduced due to limited knowledge. Insignificant organizational role and customer needs.	<input type="checkbox"/>	Competent and credible authority on specialty or operational issues. Acquired and applied excellent operational or specialty expertise for assigned duties. Showed professional growth through education, training, and professional reading. Shared knowledge and information with others. Understood own organizational role and customer needs.	<input type="checkbox"/>	Superior expertise; advice and actions showed great breadth and depth of knowledge. Remarkable grasp of complex issues, concepts, and situations. Rapidly developed professional growth beyond expectations. Vigorously conveyed knowledge and information in increased workplace productivity. Insightful knowledge of own role, customer needs, and value of work.	<input type="checkbox"/>
12. Ability To Obtain Performance/Results: Quality, quantity, timeliness, and impact of work.	<input type="checkbox"/>	Routine tasks accomplished with difficulty. Results often late or of poor quality. Work had a negative impact on department or unit. Maintained the status quo despite opportunities to improve.	<input type="checkbox"/>	Got the job done in all routine situations and in many unusual ones. Work was timely and of high quality; required same of subordinates. Results had a positive impact on the IMT. Continuously improved services and organizational effectiveness.	<input type="checkbox"/>	Maintained optimal balance among quality, quantity, and timeliness of work. Quality of own and subordinates' work surpassed expectations. Results had a significant positive impact on the IMT. Established clearly effective systems of continuous improvement.	<input type="checkbox"/>
13. Planning/ Preparedness: Ability to anticipate, determine goals, identify relevant information, set priorities and deadlines, and create a shared vision of the Incident Management Team (IMT).	<input type="checkbox"/>	Got caught by the unexpected; appeared to be controlled by events. Set vague or unrealistic goals. Used unreasonable criteria to set priorities and deadlines. Rarely had plan of action. Failed to focus on relevant information.	<input type="checkbox"/>	Consistently prepared. Set high but realistic goals. Used sound criteria to set priorities and deadlines. Used quality tools and processes to develop action plans. Identified key information. Kept supervisors and stakeholders informed.	<input type="checkbox"/>	Exceptional preparation. Always looked beyond immediate events or problems. Skillfully balanced competing demands. Developed strategies with contingency plans. Assessed all aspects of problems, including underlying issues and impact.	<input type="checkbox"/>
14. Using Resources: Ability to manage time, materials, information, money, and people (i.e., all IMT components as well as external public).	<input type="checkbox"/>	Concentrated on unproductive activities or often overlooked critical demands. Failed to use people productively. Did not follow up. Mismanaged information, money, or time. Used ineffective tools or left subordinates without means to accomplish tasks. Employed wasteful methods.	<input type="checkbox"/>	Effectively managed a variety of activities with available resources. Delegated, empowered, and followed up. Skilled time manager, budgeted own and subordinates' time productively. Ensured subordinates had adequate tools, materials, time, and direction. Cost conscious, sought ways to cut waste.	<input type="checkbox"/>	Usually skilled at bringing scarce resources to bear on the most critical of competing demands. Optimized productivity through effective delegation, empowerment, and follow-up control. Found ways to systematically reduce cost, eliminate waste, and improve efficiency.	<input type="checkbox"/>
15. Adaptability/Attitude: Ability to maintain a positive attitude and modify work methods and priorities in response to new information, changing conditions, political realities, or unexpected obstacles.	<input type="checkbox"/>	Unable to gauge effectiveness of work, recognize political realities, or make adjustments when needed. Maintained a poor outlook. Overlooked or screened out new information. Ineffective in ambiguous, complex, or pressured situations.	<input type="checkbox"/>	Receptive to change, new information, and technology. Effectively used benchmarks to improve performance and service. Monitored progress and changed course as required. Maintained a positive approach. Effectively dealt with pressure and ambiguity. Facilitated smooth transitions. Adjusted direction to accommodate political realities.	<input type="checkbox"/>	Rapidly assessed and confidently adjusted to changing conditions, political realities, new information, and technology. Very skilled at using and responding to measurement indicators. Championed organizational improvements. Effectively dealt with extremely complex situations. Turned pressure and ambiguity into constructive forces for change.	<input type="checkbox"/>
16. Communication Skills: Ability to speak effectively and listen to understand. Ability to express facts and ideas clearly and concisely.	<input type="checkbox"/>	Unable to effectively articulate ideas and facts; lacked preparation, confidence, or logic. Used inappropriate language or rambled. Nervous or distracting mannerisms.	<input type="checkbox"/>	Effectively expressed ideas and facts in individual and group situations; nonverbal actions consistent with spoken message. Communicated to people at all levels to ensure	<input type="checkbox"/>	Clearly articulated and promoted ideas before a wide range of audiences; accomplished speaker in both formal and extemporaneous situations. Adept at presenting complex or sensitive issues.	<input type="checkbox"/>

1. Name:		4. Incident Name:		3. Incident Number:		
10. Evaluation						
Rating Factors	N/A	1 – Unacceptable	2	3 – Met Standards	4	5 – Exceeded Expectations
17. Ability To Work on a Team: Ability to manage, lead and participate in teams. Encourage cooperation, and develop esprit de corps.	<input type="checkbox"/>	Used teams ineffectively or at wrong times. Conflicts mismanaged or often left unresolved, resulting in decreased team effectiveness. Excluded team members from vital information. Stifled group discussions or did not contribute productively. Inhibited cross functional cooperation to the detriment of unit or service goals.	<input type="checkbox"/>	Skilfully used teams to increase unit effectiveness, quality, and service. Resolved or managed group conflict, enhanced cooperation, and involved team members in decision process. Valued team participation. Effectively negotiated work across functional boundaries to enhance support of broader mutual goals.	<input type="checkbox"/>	Insightful use of teams raised unit productivity beyond expectations. Inspired high level of esprit de corps, even in difficult situations. Major contributor to team effort. Established relationships and networks across a broad range of people and groups, raising accomplishments of mutual goals to a remarkable level.
18. Consideration for Personnel/Team Welfare: Ability to consider and respond to others' personal needs, capabilities, and achievements; support for and application of workforce concepts and skills.	<input type="checkbox"/>	Seldom recognized or responded to needs of people; left outside resources untapped despite apparent need. Ignorance of individuals' capabilities increased chance of failure. Seldom recognized or rewarded deserving subordinates or other IMT members.	<input type="checkbox"/>	Cared for people. Recognized and responded to their needs; referred to outside resources as appropriate. Considered individuals' capabilities to maximize opportunities for success. Consistently recognized and rewarded deserving subordinates or other IMT members.	<input type="checkbox"/>	Always accessible. Enhanced overall quality of life. Actively contributed to achieving balance among IMT requirements and professional and personal responsibilities. Strong advocate for subordinates; ensured appropriate and timely recognition, both formal and informal.
19. Directing Others: Ability to influence or direct others in accomplishing tasks or missions.	<input type="checkbox"/>	Showed difficulty in directing or influencing others. Low or unclear work standards reduced productivity. Failed to hold subordinates accountable for shoddy work or irresponsible actions. Unwilling to delegate authority to increase efficiency of task accomplishment.	<input type="checkbox"/>	A leader who earned others' support and commitment. Set high work standards; clearly articulated job requirements, expectations, and empowered subordinates to set goals and objectives to accomplish tasks. When appropriate, delegated authority to those directly responsible for the task.	<input type="checkbox"/>	An inspirational leader who motivated others to achieve results not normally attainable. Won people over rather than imposing will. Clearly articulated vision; empowered subordinates to set goals and objectives to accomplish tasks. Modified leadership style to best meet challenging situations.
20. Judgment/Decisions Under Stress: Ability to make sound decisions and provide valid recommendations by using facts, experience, political acumen, common sense, risk assessment, and analytical thought.	<input type="checkbox"/>	Decisions often displayed poor analysis. Failed to make necessary decisions, or jumped to conclusions without considering facts, alternatives, and impact. Did not effectively weigh risk, cost, and time considerations. Unconcerned with political drivers on organization.	<input type="checkbox"/>	Demonstrated analytical thought and common sense in making decisions. Used facts, data, and experience, and considered the impact of alternatives and political realities. Weighed risk, cost, and time considerations. Made sound decisions promptly with the best available information.	<input type="checkbox"/>	Combined keen analytical thought, an understanding of political processes, and insight to make appropriate decisions. Focused on the key issues and the most relevant information. Did the right thing at the right time. Actions indicated awareness of impact of decisions on others. Not afraid to take reasonable risks to achieve positive results.
21. Initiative Ability to originate and act on new ideas, pursue opportunities to learn and develop, and seek responsibility without guidance and supervision.	<input type="checkbox"/>	Postponed needed action. Recommended or supported improvements only when directed to do so. Showed little interest in career development. Feasible improvements in methods, services, or products went unexplored.	<input type="checkbox"/>	Championed improvement through new ideas, methods, and practices. Anticipated problems and took prompt action to avoid or resolve them. Pursued productivity gains and enhanced mission performance by applying new ideas and methods.	<input type="checkbox"/>	Aggressively sought out additional responsibility. A self-learner. Made worthwhile ideas and practices work when others might have given up. Extremely innovative. Optimized use of new ideas and methods to improve work processes and decisionmaking.
22. Physical Ability for the Job: Ability to invest in the IMT's future by caring for the physical health and emotional well-being of self and others.	<input type="checkbox"/>	Failed to meet minimum standards of sobriety. Tolerated or condoned others' alcohol abuse. Seldom considered subordinates' health and well-being. Unwilling or unable to recognize and manage stress despite apparent need.	<input type="checkbox"/>	Committed to health and well-being of self and subordinates. Enhanced personal performance through activities supported physical and emotional well-being. Recognized and managed stress effectively.	<input type="checkbox"/>	Remarkable vitality, enthusiasm, alertness, and energy. Consistently contributed at high levels of activity. Optimized personal performance through involvement in activities that supported physical and emotional well-being. Monitored and helped others deal with stress and enhance health and well-being.
23. Adherence to Safety: Ability to invest in the IMT's future by caring for the safety of self and others.	<input type="checkbox"/>	Failed to adequately identify and protect personnel from safety hazards.	<input type="checkbox"/>	Ensured that safe operating procedures were followed.	<input type="checkbox"/>	Demonstrated a significant commitment toward safety of personnel.
24. Remarks:						
25. Rated Individual (This rating has been discussed with me): Signature: _____ Date/Time: _____						
26. Rated by: Name: _____ Signature: _____ Home Unit: _____ Position Held on This Incident: _____						
ICS 225		Date/Time: _____				

6

INCIDENT PERSONNEL PERFORMANCE RATING INSTRUCTIONS: The immediate job supervisor will prepare this form for each subordinate. It will be delivered to the planning section before the rater leaves the fire. Rating will be reviewed with employee who will sign at the bottom.

THIS RATING TO BE USED ONLY FOR DETERMINING AN INDIVIDUAL'S PERFORMANCE

1. Name: [Redacted] 2. Fire Name and Number: [Redacted]
 3. Home Unit (address): [Redacted] 4. Location of Fire (address): [Redacted]

5. Fire Position: HEOP (D) 6. Date of Assignment From: 2/8/18 To: 3/8/18 7. Acres Burned: 125 8. Fuel Type(s): brush

9. Evaluation

Enter X under appropriate rating number and under proper heading for each category listed. Definition for each rating number follows:

0 - Deficient. Does not meet minimum requirements of the individual statement. DEFICIENCIES MUST BE IDENTIFIED IN REMARKS.
 1 - Needs to improve. Meets some or most of the requirements of the individual element. IDENTIFY IMPROVEMENT NEEDED IN REMARKS.
 2 - Satisfactory. Employee meets all requirements of the individual element.
 3 - Superior. Employee consistently exceeds the performance requirements.

Rating Factors	Hot Line			Map-Up			Camp			Other (Specify)		
	0	1	2	3	0	1	2	3	0	1	2	3
Knowledge of the job												
Ability to obtain performance												X
Attitude											X	X
Decisions under stress											X	X
Initiative											X	X
Consideration for personnel welfare											X	X
Obtain necessary equipment and supplies											X	X
Physical ability for the job											X	X
Safety											X	X
Other (specify)											X	X

10. Remarks: line const.
 [Redacted] did a good job putting in line on the [Redacted] fire. Smooth, drivable line where country allowed. Worked on making line wider for fuel type we were in. [Redacted] simply needs a fire with activity to show he is comfortable in a more challenging situation. Look forward to working with [Redacted] again. follows direction well w/ verbal and flagging. Take pride in your work, keep up the good work

11. Employee (signature) This rating has been discussed with me [Redacted] 12. Date: 3-17-18
 13. Rate By (signature): [Redacted] 14. Home Unit (address): [Redacted] 15. Position of Fire: DZ1A / Heab(t) 16. Date: 3-17-18

225-Good Example

- All proper information is filled out like the previous example.
- This shows where the evaluator explained what happened on the incident as well as provided direction on what the trainee needs to work on.
- This helps the trainee focus on a certain area in the taskbook that needs improvement or an area that they have not experienced yet.

Standards for AHIMT Qualification

Texas Type 3 All-Hazard Incident Management System
Qualifications Guide



**Texas
Type 3 All-Hazard Incident
Management Team (AHIMT)
Qualifications Guide**

[https://ticc.tamu.edu/Documents/IncidentResponse/AHIMT/Texas AH Type 3 Qualification Guide.pdf](https://ticc.tamu.edu/Documents/IncidentResponse/AHIMT/Texas%20AH%20Type%203%20Qualification%20Guide.pdf)

Contains all the guidance on:
IMT positions
Qualifications
Records
Process

May 31, 2017

Texas AHIMT Task Book Requirements

A completed Task Book must contain a minimum of four (4) assignment evaluator records, from a minimum of two evaluators. Two (2) evaluation records may be for incidents/events that occurred within a three year period prior to the day a PTB is initiated. The final evaluator has to be qualified at the position for the Task Book.

Personnel in the IQS system prior to June 1, 2013 may be qualified under guidelines established in the March 15, 2011 Credentialing Guide.

Agency Certification

1. Final evaluator completes the “Final Evaluator’s Verification” in the front of the book.
2. The Book is forwarded to the Committee or Board responsible to review this within the agency.
3. Once approved, the Agency person responsible for Certification will complete the “Agency Certificate”
4. The Task Book will be entered into IQS
5. The Trainee will keep a copy for their records
6. For TIFMAS, the book will be forwarded for any required reviews before being placed in the state record system.

Verification/Certification of Completed Task Book for the Position of: _____ (position title)
Final Evaluator’s Verification <i>To be completed ONLY when you are recommending the trainee for certification.</i> I verify that (trainee name) _____ has successfully performed as a trainee by demonstrating all tasks for the position listed above and should be considered for certification in this position. All tasks are documented with appropriate initials. Final Evaluator’s Signature: _____ Final Evaluator’s Printed Name: _____ Home Unit Title: _____ Home Unit/Agency: _____ Home Unit Phone Number: _____ Date: _____
Agency Certification I certify that (trainee name) _____ has met all requirements for qualification in the above position and that such qualification has been issued. Certifying Official’s Signature: _____ Certifying Official’s Printed Name: _____ Title: _____ Home Unit/Agency: _____ Home Unit Phone Number: _____ Date: _____

Additional copies of this publication are available through:
NWCG, Publications Management System at <http://www.nwcg.gov/pms/taskbook/taskbook.htm>

Questions and Discussion!