



TRAINING SPECIALIST

Version 01.00.00

Tuesday, March 15, 2016

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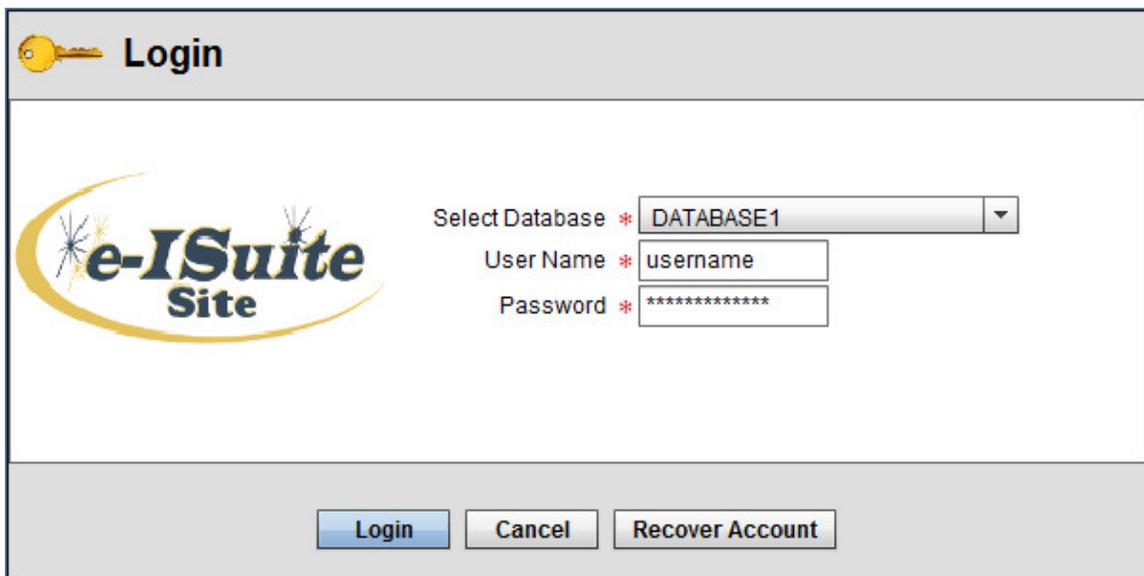
Training Specialist Login

NOTE: Only non-privileged user accounts with a Training Specialist role can access the Training Specialist area. The user must first select an Incident/Incident Group before selecting the Training Specialist button.

NOTE: For application login information, see the e-ISuite website at <http://famit.nwcg.gov/applications/eISuite>. This website also includes general information about the application, User Guides, Getting Started information, Quick Reference Cards, and Online Tutorials.

Follow the steps in this section to add an assignment to a Trainee.

1. In the Site system, select a database from the **Select Database** drop-down list on the Login page.
2. Enter a valid **User Name** and **Password** and click the **Login** button.



 **Login**



Select Database * DATABASE1

User Name * username

Password * *****

Accessing the Enterprise version of e-ISuite requires a NAP user account.

3. On the Home page, click the Incidents button.



4. The Incidents grid will display. Select an Incident or an Incident Group.

e-ISuite Site Welcome tallison Active Database: NEVERFIRE

Incidents Training Reports

Incident Name	Incident #	Event Type	Start Date	Jurisdiction	Default Accounting	
▼ SITE_GROUP						
NEVERFIRE2	US-OR-500S-234523	FIRE - WILDFIRE	02/15/2016	USFS	9932	FED

5. Select the **Training** button.

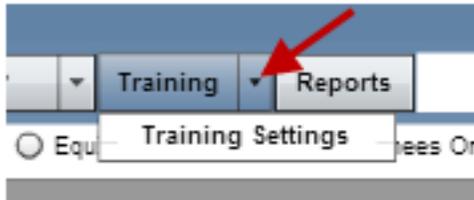
e-ISuite Site Welcome tallison Active Database: NEVERFIRE

Incidents **Training** Reports

Incident Name	Incident #	Event Type	Start Date	Jurisdiction
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Training Specialist Settings

1. From the Training drop-down menu, select the **Training Settings** option.



2. Select the **Incident Settings** tab.
3. When an Incident Group is selected, check the **Apply to All Incidents in Group** checkbox to apply the settings to all incidents in the group. To apply the settings to a single incident in the Incident Group, uncheck the Apply to All Incidents in Group checkbox and select the appropriate incident from the **Select Incident** drop-down list.
4. Select a **Complexity** from the drop-down list. The following options are available:
 - Type A - Area Command
 - Type 1 - Type 1 team assigned
 - Type 2 - Type 2 team assigned
 - Type 3 - Extended attack with multiple resources
 - Type 4 - Initial Attack
 - Type 5 - Initial Attack with very few resources
 - Type 1 (Prescribed Fire) - High
 - Type 2 (Prescribed Fire) - Moderate
 - Type 3 (Prescribed Fire) - Low
5. Enter the **Number of Acres**.
6. Select any of the following fuel types from the **Available Fuel Types** list by moving the fuel type to the **Selected Fuel Types** list.
 - G - Grass Group

- B - Brush Group
- T - Timber Group
- S - Slash Group

7. Click **Save** to save the Incident Settings.

The screenshot shows a software window titled "Training Specialist Settings" with three tabs: "Incident Settings" (selected and circled), "Training Specialist Contact Information", and "Trainee Priority Program".

Under the "Incident Settings" tab, there are two input fields: "Complexity" with a dropdown menu set to "TYPE 2", and "Acres" with a text box containing "5555".

Below these fields are two list boxes. The left box, titled "Available Fuel Types", contains three items: "G - GRASS GROUP", "S - SLASH GROUP", and "T - TIMBER GROUP". The right box, titled "Selected Fuel Types", contains one item: "B - BRUSH GROUP". Between these two boxes are four vertical navigation arrows: a right arrow, a left arrow, a right arrow, and a left arrow.

At the bottom of the window are two buttons: "Save" and "Cancel".

NOTE: All forms and reports will only show the B, G, S or T for the Fuel Type and not the full description.

8. Select the **Training Specialist Contact Information** tab.
9. Select a resource from the upper grid.
10. Check the **Active** checkbox to indicate the resource is an Active Training Specialist, which will enable their Training Specialist data to display on forms and reports.
11. Enter the **Address, City, State, Zip Code, Phone** and **Email**.
12. Click the **Save** button.
13. Selected Training Specialists will display in the lower grid.

Training Specialist Settings

Incident Settings | Training Specialist Contact Information | Trainee Priority Program

Contact Information

Request Number	Resource Name	Item Code	Item Description	Status	Unit ID	Unit Description
		T				
O-29	WILSON, JEROMY	TFLD	TASK FORCE LEADER	F	OR-UMF	UMATILLA NATIONAL FOREST
O-109	BURNS, STEVE	THSP	TECHNICAL SPECIALIST	F	OR-RSF	ROGUE RIVER-SISKIYOU NATIONAL FORE
O-110	BERGSTROM, ROY	THSP	TECHNICAL SPECIALIST	F	OR-RSF	ROGUE RIVER-SISKIYOU NATIONAL FORE
O-59	DONALD, DONETT	TNSP	TRAINING SPECIALIST	C	OR-MHF	MT. HOOD NATIONAL FOREST

DONALD, DONETT - O-59

Active

Address 123 MAIN ST. Zip Code 97555

City BEND Phone (123) 123-4455

State OR Email DON@GMAIL.COM

Save Cancel Clear Delete

Request Number	Resource Name	Item Code	Item Description	Status	Unit ID	Unit Description	Active
							<input type="checkbox"/>
O-48	RANDALL, RANDY	TNSP	TRAINING SPECIALIST	C	OR-RSF	ROGUE RIVER-SISKIYOU NATIONAL	<input checked="" type="checkbox"/>
O-51	APPLE, AMILLIA	TNSP	TRAINING SPECIALIST	C	OR-RSF	ROGUE RIVER-SISKIYOU NATIONAL	<input checked="" type="checkbox"/>

14. Select the **Trainee Priority Programs** tab.
15. Enter a Priority Program in the **Priority Program** field and click **Save**. The Priority Programs defined in this area will display in the **Priority Programs** drop-down list on the **Trainee Data** tab.
16. To remove a Priority Program from the Priority Programs drop-down list on the Trainee Data tab, select a Priority Program and click the **Delete** button.

Training Specialist Settings

Incident Settings | Training Specialist Contact Information | **Trainee Priority Program**

Priority Program *

Priority Program
NORTHWEST PLANNING AND LOGISTICS PROGRAM
NORTHWEST PRIORITY PROGRAM
SOUTH EAST OPERATIONS PROGRAM

Add a Trainee Assignment

1. Filter the grid by **All Personnel**, **Overhead Personnel**, **Aircraft Personnel**, **Crew Personnel** or **Equipment Personnel** by selecting the corresponding radio button at the top of the window.
2. Select a Trainee from the resources grid.
3. The **Trainee Assignment** field defaults to the item code for the resource's current assignment. To change the Trainee Assignment, select a different item code from the drop-down list. The **Functional Area** is populated with the Section Code for the selected Item Code.

Selected Incident: BUCKSKIN US-OR-RSF-000382

Incidents Training Reports

All Personnel Overhead Personnel Crew Personnel Equipment Personnel Trainers Only Exclude Filled Exclude Demob/Reassigned

Data Form Evaluation Record Performance Evaluation Home Unit Letter Exit Interview Assignment Closeout

Request Number	Resource Name	Item Code	Status	Agency
O-13	COVILLE, CLAY	ICT2	C	USFS
O-16.3	PETROCK, PETER	SOF2	C	BLM
O-16.7	THOMAS, TIM	OSC2	C	USFS
O-16.1	MILLER, MIKE	DIV5	C	USFS
O-16.1	MCKLEIN, MELVIN	DIV5	C	USFS
O-16.1	JACKSON, JOHN	DIV5	C	USFS
O-16.1	GARDNER, GEORGE	HEB1	C	OR
O-16.1	MCGRATH, MAURICE	SOF2	C	USFS
O-16.2	KOE, KEN	LSC2	C	USFS
O-16.2	FILBERT, FEONIA	MEDL	C	USFS
O-16.3	WATSON, WYATT	MEDL	C	USFS
O-16.3	GERKE, GEORGE	LOFR	C	USFS
O-16.5	PUTMAN, PETUNIA	HEB2	C	USFS

O-16.12 MILLER, MIKE Trainee Total: 10 Priority Trainees: 7

Incident Assignment: DIV5 - DIVISION/GROUP SUPERVISOR Traine

Traine Assignment: OSC2 Functional Area: OPERATIONS

Traine Assignment	Description
OSC2	OPERATIONS SECTION CHIEF, TYPE 2
STPS	STRUCTURAL PROTECTION SPECIALIST

Trainee Data Evaluator Data

Initial Assignment Home Unit Contact Objectives

Assignment Start Date: 02/14/2016 Assignment End Date: 02/29/2016

Prerequisites:

Trainee possesses valid Red Card or Agency Certification Card Trainee has Home Unit initiated position task book?

Priority Program NORTHWEST PRIORITY Trainee has Incident issued task book?

Save Cancel Clear Delete

NOTE: The Trainee Total and Priority Total both display at the top of the screen. To view the qualifications for the selected resource, click the **View Quals** button.

Selected Incident: BUCKSKIN US-OR-RSF-000382

Incidents Training Reports

All Personnel Overhead Personnel Crew Personnel Equipment Personnel Trainers Only Exclude Filled Exclude Demob/Reassigned

Data Form Evaluation Record Performance Evaluation Home Unit Letter Exit Interview Assignment Closeout

Request Number	Resource Name	Item Code	Status	Agency
O-13	COVILLE, CLAY	ICT2	C	USFS
O-16.3	PETROCK, PETER	SOF2	C	BLM
O-16.7	THOMAS, TIM	OSC2	C	USFS
O-16.1	MILLER, MIKE	DIV5	C	USFS
O-16.1	MCKLEIN, MELVIN	DIV5	C	USFS

O-16.12 MILLER, MIKE Trainee Total: 10 Priority Trainees: 7

Incident Assignment: DIV5 - DIVISION/GROUP SUPERVISOR Traine

Traine Assignment: OSC2 Functional Area: OPERATIONS

Traine Assignment	Description
OSC2	OPERATIONS SECTION CHIEF, TYPE 2
STPS	STRUCTURAL PROTECTION SPECIALIST

View Quals

4. On the **Trainee Data** tab, enter the following information:

- If applicable, select the **Initial Assignment** checkbox.
- Enter the **Assignment Start Date** and the **Assignment End Date**.
- If applicable, select the **Trainee possess valid Red Card or agency certification card** checkbox.
- If the training assignment is a Priority Program, check the **Priority Program** checkbox and select the Priority Program from the drop-down list.
- Identify the task book the trainee is using by selecting one of the following options:
 - Trainee has home unit initiated position task book
 - Trainee has incident issued task book.

5. Click the **Save** button to save the trainee assignment.

The screenshot shows a software interface with a table of trainees and a detailed view for O-16.12 MILLER, MIKE. The table lists trainees with columns for Request Number, Resource Name, Item Code, Status, and Agency. The detailed view for O-16.12 MILLER, MIKE shows Incident Assignment: DIVS - DIVISION/GROUP SUPERVISOR, Trainee Assignment: OSC2, and Functional Area: OPERATIONS. A red arrow points to the 'Save' button in the Trainee Data tab.

Request Number	Resource Name	Item Code	Status	Agency
O-13	COVILLE, CLAY	ICT2	C	USFS
O-16.3	PETROCK, PETER	SOF2	C	BLM
O-16.7	THOMAS, TIM	OSC2	C	USFS
O-16.1	MILLER, MIKE	DIVS	C	USFS
O-16.1	MCKLEIN, MELVIN	DIVS	C	USFS
O-16.1	JACKSON, JOHN	DIVS	C	USFS
O-16.1	GARDNER, GEORGE	HEB1	C	OR
O-16.1	MORATH, MAURICE	SOF2	C	USFS
O-16.2	KOE, KEN	LSC2	C	USFS
O-16.2	FILBERT, FEONIA	MEDL	C	USFS
O-16.3	WATSON, WYATT	MEDL	C	USFS
O-16.3	GERKE, GEORGE	LOFR	C	USFS
O-16.5	PUTMAN, PETUNIA	HEB2	C	USFS

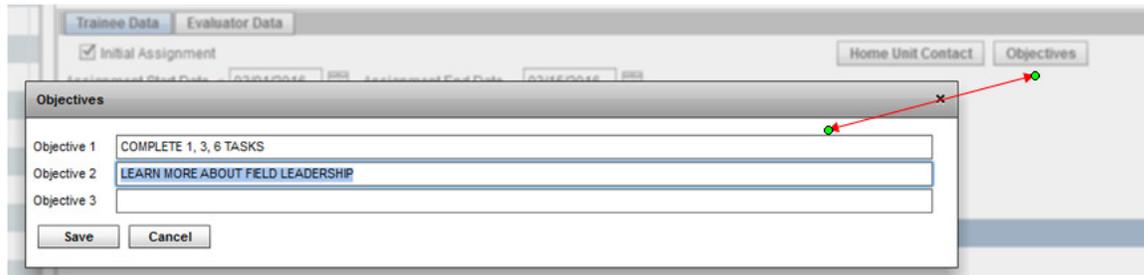
6. To enter the Home Unit Contact information for the Trainee, click the **Home Unit** button and enter the Home Unit Contact's **Name**, **Unit ID**, **Address**, **City**, **State**, **Zip Code**, **Phone** and **Email**.

The screenshot shows the Home Unit Contact dialog box for O-16.12 MILLER, MIKE. The dialog box contains fields for Name, Unit ID, Unit Description, Address, City, State, Zip Code, Phone, and Email. A red arrow points to the 'Home Unit Contact' button in the background interface.

Trainee Assignment	Description
OSC2	OPERATIONS SECTION CHIEF, TYPE 2
STPS	STRUCTURAL PROTECTION SPECIALIST

NOTE: Make sure to click the **Save** button on the Trainee Data tab before adding Objectives.

7. Click the **Objectives** button to add objectives to the Trainee's profile. Enter up to three different objectives. Click the **Save** button to save the objectives.



8. Click the **Evaluator Data** tab.

NOTE: A Trainee Assignment must first be selected in the Trainee Assignment grid before attaching an Evaluator to it.

- Follow these steps to add an Evaluator to the Trainee Assignment from the incident:
 - Click the **Add Evaluator** from Incident button.
 - Filter the list of resources in the grid, and then select the resource that will be the evaluator.
 - Enter the **Address, City, State, Zip Code, Phone** and **Email** for the evaluator.
 - Click the **Add Selected Resource** button to add the resource as an evaluator.

16.12 MILLER, MIKE Trainee Total: 10 Priority Trainees: 7

Incident Assignment: DIVS - DIVISION/GROUP SUPERVISOR Trainee View Quals

Trainee Assignment: OSC2 Functional Area: OPERATIONS

Request Number	Resource Name	Item Code	Status
			C
O-13	COVILLE, CLAY	ICT2	C
O-16.3	PETROCK, PETER	SOF2	C
O-16.7	THOMAS, TIM	OSC2	C
O-16.13	MCKLEIN, MELVIN	DIVS	C
O-16.14	JACKSON, JOHN	DIVS	C

Name: THOMAS, TIM
 Unit ID: OR-UFF
 Unit Description: UMPQUA NATIONAL FOREST
 Item Code: OSC2
 Item Description: OPERATIONS SECTION CHEF, TYPE 2
 Address: 1428 MCNARY ST.
 City: BEND
 State: OR
 Zip Code: 97222
 Phone: (123) 123-4455
 Email: TM@GMAIL.COM

Save Cancel

- Follow these steps to add a non-incident evaluator to the Trainee Assignment:
 - Click the **Add Non-Incident Evaluator** button.
 - Enter the evaluator's **Name, Unit ID, Item Code, Address, City, State, Zip Code, Phone** and **Email**.
 - Click the **Save** button.

Incident and Non-Incident Evaluator information will display in the Evaluator grid:

Request Number		Resource Name		Item Code	Item Description	Status	Unit ID	Unit Description
		DOD GMITI		STPS	STRUCTURAL PROTECTION SPECIALIST		OR-520S	ASTORIA DISTRICT
C-1.3		GREEN, HANK		FFT1	FIREFIGHTER, TYPE 1	C	OR-500S	NORTHWEST OREGON AREA

Assignment Closeout

1. Click the **Assignment Closeout** button to close out the trainee's assignment.

2. The **Assignment Start Date** is populated with the date defined on the Trainee Data tab. Change this date, as needed.
3. The **Assignment End Date** is populated with the date defined on the Trainee Data tab. Change this date, as needed.
4. The system automatically calculates the **Length of Trainee Assignment** based on the Assignment Start Date and the Assignment End Date.
5. Enter the appropriate **PTB Progress**.

6. Select one of the following **Recommendations** from the drop-down list. The recommendation list includes four options:
- 1- The trainee has successfully performed all tasks in the PTB for the position. The final evaluator has completed the final evaluator's verification section and recommended the trainee be considered for agency certification.
 - 2- The tasks have been performed 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.
7. The Complexity field defaults to the Complexity defined on the Training Specialist Incident Settings. If needed, change the Complexity by selecting one of the following options from the drop-down list.
- Type A - Area Command
 - Type 1 - Type 1 team assigned
 - Type 2 - Type 2 team assigned
 - Type 3 - Extended attack with multiple resources
 - Type 4 - Initial Attack
 - Type 5 - Initial Attack with very few resources
 - Type 1 (Prescribed Fire) - High
 - Type 2 (Prescribed Fire) - Moderate
 - Type 3 (Prescribed Fire) - Low
8. The **Acres** field defaults to the Acres entered in the Training Incident Settings. If needed, change the value in this field. To update the value in

the Acres field on the Incident Settings page to match the value in this field, click the **Update Default Acres** button.

9. The **Selected Fuel Types** default to the Fuel Types selected on the Training Incident Settings window. If needed, change the selected Fuel Types by adding or removing the following fuel types from the Selected Fuel Types field:

- G – Grass Group
- B – Brush Group
- T – Timber Group
- S – Slash Group

10. Enter any remarks in the **Remarks** box.

11. Click **Save** to save the assignment closeout information.

The screenshot shows the 'Assignment Closeout' window for resource O-1 SMITH, JOHN (FFT1 - FIREFIGHTER, TYPE 1). The form contains the following fields and options:

- Assignment Start Date: 03/01/2016
- Assignment End Date: 03/15/2016
- Recommendation: 2
- Complexity: TYPE 2
- Length of Trainee Assignment: [empty]
- PTB Progress: 75
- Acres: 55555
- Update Default Acres button
- Available Fuel Types: G - GRASS GROUP, S - SLASH GROUP, T - TIMBER GROUP
- Selected Fuel Types: B - BRUSH GROUP
- Remarks: [empty text box]
- Save and Cancel buttons at the bottom.

A red arrow points to the 'Update Default Acres' button.

Training Specialist Reports, Forms, Labels

There are two ways to print the **Data Form**, **Evaluator Record**, **Performance Evaluation**, **Home Unit Letter** and **Exit Interview**. Select a resource from the main Training Specialist page and click one of the report buttons at the top of the page. This will print the report with data for the selected resource.



To print reports, blank forms and labels, select the **Reports** button from the main toolbar. Then click the **Training Specialist Reports** button.

The following reports are available:

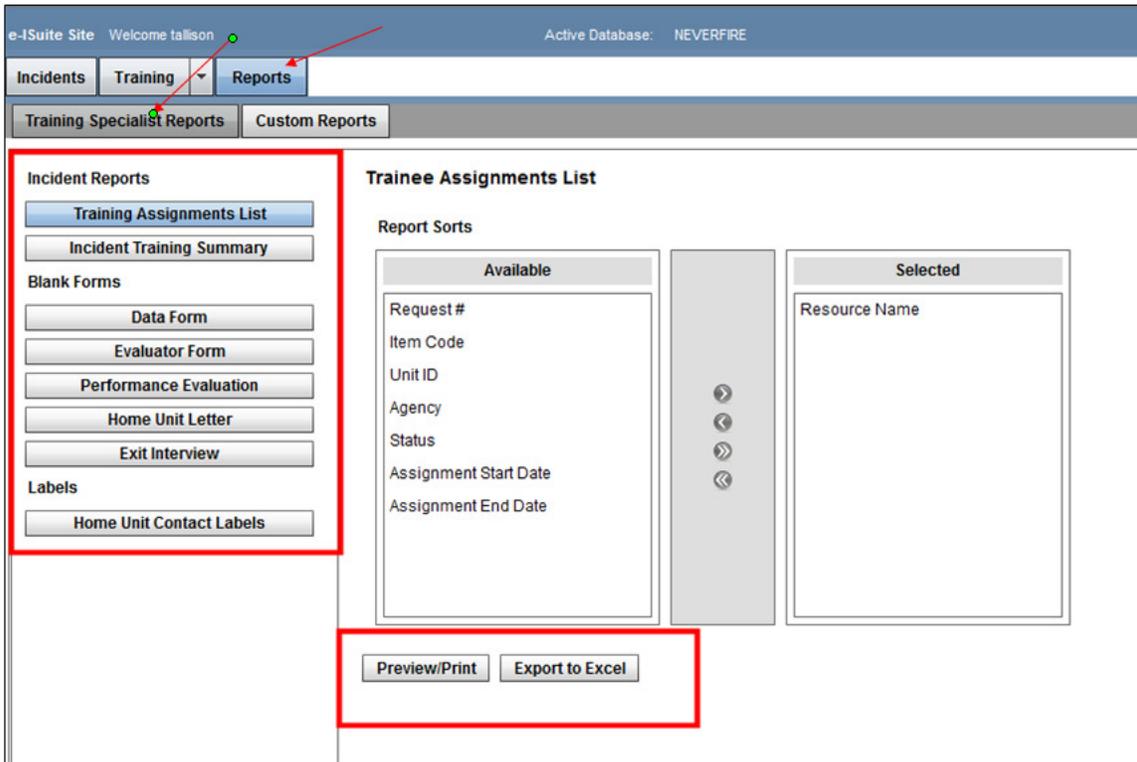
- Training Assignments List
- Incident Training Summary

The following blank forms are available:

- Data Form
- Evaluator Form
- Performance Evaluation
- Home Unit Letter
- Exit Interview

The following labels are available:

- Home Unit Contact Labels



Incident Training Assignments List

1. Select the **Training Assignments List** button.
2. Select the applicable sorts from the **Available** list and shuttle them to the **Selected** list.
3. Click the **Preview/Print** button to preview or print the report.
4. Click the **Export to Excel** button to open the report in Excel.

INCIDENT TRAINING ASSIGNMENTS LIST BUCKSKIN

Training Specialist	Req. #	Item Code	Asgmt Start	Asgmt End	Agency	Home Unit	Trainer / Evaluator	Recom *1.2.	PTB %	Section
APPLE, AMILLIA	O-16.29	MEDL	03/01/2016	03/05/2016	USFS	OR-MHF	KEN KOE	2	30	LOGISTICS
GERKE, GEORGE	O-16.35	LOFR	03/01/2016	03/08/2016	USFS	OR-DEF	CLAY COVILLE	2	60	COMMAND
JACKSON, JOHN	O-16.14	SOFR	03/01/2016	03/05/2016	USFS	OR-DEF	PETER PETROCK	2	40	COMMAND

Incident Training Summary

1. Click the **Incident Training Summary** button.
2. Enter the **Start Date** to include in the report.
3. Enter the **End Date** to include in the report.
4. Click the **Preview/Print** button to preview or print the report. The report format will be in .PDF format.

INCIDENT TRAINING SUMMARY							
(NEVERFIRE2 / OR-500S-234523)							
02/15/2016-03/14/2016							
Training Specialist	GREEN, HANK			Agency	USFS	Unit ID	OR-500S
Phone				Email			
Training Specialist	SKELTON, RED			Agency	USFS	Unit ID	OR-500S
Phone				Email			
Number of Trainees per Section and Agency							
Agency	Command	Operations	Plans	Logistics	Finance	External	Total
BLM	0	1	0	0	0	0	1
USFS	0	2	1	0	0	0	3
Total	0	3	1	0	0	0	4
Priority Program Resource Counts							
NORTHWEST PLANNING AND LOGISTICS		1		Incident Personnel Ordered as Trainees		3	
NORTHWEST PRIORITY PROGRAM		1		Trainees Assigned on the Incident		4	
SOUTHEAST OPERATIONS PROGRAM		2		Example: Engine, Helicopter, Handcrew Modules or Individual resources reassigned on incident for training opportunity			
NUMBER OF TRAINEES WITH THE FOLLOWING RATINGS							
1	1. The trainee has successfully performed all tasks in the PTB for the position. The Final Evaluator has completed the Final Evaluator's Verification section and recommended the trainee be considered for agency certification.						
1	2. The tasks have been performed 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.						
0	3. The trainee did not complete certain tasks in the PTB in a satisfactory manner and additional training, guidance, or experience is recommended.						
0	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.						
Remarks:							

Data Form

1. On the Training Specialist Reports page, click the **Preview/Print** button to print a blank form.
2. The user will need to select a Training Specialist to print on the form if there are multiple active training specialists.

Trainee Name PUTMAN, PETUNIA
Trainee Request # O-16.51

INCIDENT TRAINEE DATA FORM					
TRAINEE DATA					
Trainee Name	PUTMAN, PETUNIA			Request #	O-16.51
Trainee Item Code	HEB2	Item Code Description	HELIBASE MANAGER, 1 TO 5 HELICOPTERS		
Section	OPERATIONS	Initial Assignment?	Y	Agency	USFS
Unit ID	OR-DEF	Unit ID Description	DESCHUTES NATIONAL FOREST		
Assignment Start	03/01/2016	Assignment End			
1. Trainee possesses valid Red Card or agency certification card?					Y
2. Trainee has CURRENT home unit initiated Position Task Book?					NO
3. Trainee has incident issued Task Book with concurrence of home unit?					NO
Priority Trainee?	Y	Priority Program	NORTHWEST PRIORITY PROGRAM		
HOME UNIT CONTACT					
Name	KIM KERRY				
Unit ID	OR-520S	Unit ID Description	ASTORIA DISTRICT		
Address	15 TOWN AGVE				
City	ASTORIA	State	OR	Zip	98777
Phone	(333) 666-7777	E-Mail	KIM@GMAIL.COM		
TRAINEE GOALS (Tasks to be evaluated on this incident)					
1.	START THE PTB				
2.	GET THE *O* TASKS DONE				
3.					
TRAINER/EVALUATOR DATA					
Name	GARDNER, GEORGE			Request #	O-16.15
Item Code	HEB1	Item Code Description	HELIBASE MANAGER, 6 OR MORE		
Unit ID	OR-954S	Unit Description	THE DALLES UNIT		
Address	333 TRAD				
City	THE DALLES	State	OR	Zip	94445
Phone	(666) 555-8888	E-Mail	GEORGE@GMAIL.COM		
Recommendation #		PTB Progress %	0		
INCIDENT DATA (For Training Specialist Use Only)					
Incident Name	BUCKSKIN		Incident Number	OR-RSF-000382	
Incident Type	WF		Complexity	TYPE 2	
Acres	570		Fuel Type	G,T	
TRAINING SPECIALIST (For Training Specialist Use Only)					
Name	APPLE, AMILLIA			Agency	USFS
Unit ID	OR-RSF		Unit Description	ROGUE RIVER-SISKIYOU	
Phone	(123) 123-4533		E-Mail	AMILLIA@GMAIL.COM	

Trainee Name
Trainee Request #

INCIDENT TRAINEE DATA FORM

Trainee Progress Reviews:

DATE	TIME	COMMENTS

(1 copy to each: Home Unit and Final Incident Package)

TNSP-1
Page 2 of 2

Evaluator Form

1. On the Training Specialist Reports page, click the **Preview/Print** button to print a blank form.

EVALUATION RECORD

Evaluation Record # 2

Trainee Information			
Printed Name	PUTMAN, PETUNIA		
Trainee Position on Incident/Event	HEB2 - HELIBASE MANAGER, 1 TO 5 HELICOPTERS		
Home Unit/Agency	OR-DEF USFS		
Home Unit/Agency Address/Phone	15 TOWN AGVE ASTORIA, OR 98777 (333) 666-7777		
Evaluator Information			
Printed Name	O-16.15 GARDNER, GEORGE		
Evaluator Position on Incident/Event	HEB1 HELIBASE MANAGER, 6 OR MORE HELICOPTERS		
Home Unit/Agency	OR-954S		
Home Unit/Agency Address/Phone	333 TRAD THE DALLES, OR 94445 (666) 555-8888		
Incident/Event Information			
Incident Name	BUCKSKIN	Incident Number	OR-RSF-000382
Duration		Incident Type	WF
Fuel Type	G,T	Complexity Type	TYPE 2
Evaluator's Recommendation (Initial only one line as appropriate)			
<input type="checkbox"/> 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.			
<input type="checkbox"/> 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.			
<input type="checkbox"/> 3. The trainee did not complete certain tasks in the PTB in a satisfactory manner and additional training, guidance, or experience is recommended.			
<input type="checkbox"/> 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.			
Comments:			

Evaluator's Signature: _____ Date: _____

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

Performance Evaluation

1. On the Training Specialist Reports page, click the **Preview/Print** button to print a blank form.

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 PUTMAN, PETUNIA			2. Fire Name and Number BUCKSKIN / OR-RSF-000382										
3. Home Unit (address) 15 TOWN AGVE ASTORIA, OR 98777			4. Location of Fire (address)										
5. Fire Position HEB2 - HELIBASE MANAGER, 1		6. Date of Assignment From 03/01/2016 To:		7. Acres Burned 570	8. Fuel Type(s) G,T								
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) OR-854S				15. Position of Fire HEB1		16. Date			

Home Unit Letter

1. On the Training Specialist Reports page, click the **Preview/Print** button to print a blank form.
2. The user will need to select a Training Specialist to print on the form if there are multiple active training specialists

HOME UNIT LETTER

To	KIM KERRY OR-520S	Date	03/08/2016
Trainee Name	PUTMAN, PETUNIA		
Trainee Position	HEB2 - HELIBASE MANAGER, 1 TO 5 HELICOPTERS		
Incident Name	BUCKSKIN	Incident Number	OR-RSF-000362
Incident Type	WF	Acres	570
Fuel Type	G,T	Complexity	TYPE 2
<p>The enclosed training forms are the records of the training assignment. The recommendations given are those of the Training Specialist that was assigned to the incident, with input from the trainee and the coach/evaluator of the position. It is the responsibility of the home unit to ensure the assignment is properly credited and the individual's Qualification Record is updated, per agency certification standards.</p> <p>The recommendation for this trainee is:</p> <p><input type="checkbox"/> 1. The trainee has successfully performed all tasks in the PTB for the position. The Final Evaluator has completed the Final Evaluator's Verification section and recommended the trainee be considered for agency certification.</p> <p><input checked="" type="checkbox"/> 2. The tasks have been performed 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.</p> <p><input type="checkbox"/> 3. The trainee did not complete certain tasks in the PTB in a satisfactory manner and additional training, guidance, or experience is recommended.</p> <p><input type="checkbox"/> 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.</p> <p>Remarks:</p> <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>			

If additional training or trainee experience is indicated, efforts should be made by the home unit to provide additional training assignments.

Training Specialist (signature)

Training Specialist	APPLE, AMILLIA	Agency	USFS	Unit ID	OR-RSF
Email	AMILLIA@GMAIL.COM	Phone	(123) 123-4533		

TNSP-5

Exit Interview

1. On the Training Specialist Reports page, click the **Preview/Print** button to print a blank form.
2. The user will need to select a Training Specialist to print on the form if there are multiple active training specialists

Incident Trainee Exit Interview

(BUCKSKIN / OR-RSF-000382)

Trainee:	PUTMAN, PETUNIA	Trainee Position:	HEB2
Trainer/Evaluator:	GARDNER, GEORGE		
Training Specialist:	APPLE, AMILLIA		

1. Is this your first assignment in this position?	Y	N
2. Do you feel you benefited from this assignment? (Explain)		
3. Were your training goals accomplished?	Y	N (if no, explain)
4. Would you prefer another trainee assignment?	Y	N
5. Comments regarding your trainer/evaluator. (Assistance, Ability, Knowledge of position, etc.)		
6. Do you feel you could perform in this position if assigned?	Y	N
7. Did your Trainer certify the tasks in your Position Taskbook?	Y	N
8. Did you receive a final performance evaluation?	Y	N
_____ Trainee (Signature)	_____ Date	
_____ Trainer/Evaluator (Signature)	_____ Date	

TNSP-4

Home Unit Contact Labels

1. Select the Home Unit Contacts to print on the labels. To select all Home Unit Contacts, click the **Select All** button.

2. Click the **Preview/Print** button to preview and then print the labels on Avery 5161 label sheets.
3. Click the **Export to Excel** button to export the labels to Excel.

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