

**NWCG Task Book for the Position of:**

**BASE/CAMP MANAGER  
(BCMG)**



**PMS 311-42**

**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.*

**Verification/Certification of Completed Task Book  
for the Position of:**

**BASE CAMP MANAGER**

**Final Evaluator's Verification**

*To be completed **ONLY** when you are recommending the trainee for certification.*

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 <https://www.nwcg.gov/publications/position-taskbooks>

## **NATIONAL WILDFIRE COORDINATING GROUP (NWCG) POSITION TASK BOOK**

NWCG Position Task Books (PTBs) have been developed for designated National Interagency Incident Management System (NIIMS) positions. Each PTB lists the competencies, behaviors and tasks required for successful performance in specific positions. Trainees must be observed completing all tasks and show knowledge and competency in their performance during the completion of this PTB.

Trainees are evaluated during this process by qualified evaluators, and the trainee's performance is documented in the PTB for each task by the evaluator's initials and date of completion. An Evaluation Record will be completed by all evaluators documenting the trainee's progress after each evaluation opportunity.

Successful performance of all tasks, as observed and recorded by an evaluator, will result in a recommendation to the agency that the trainee be certified in that position. Evaluation and confirmation of the trainee's performance while completing all tasks may occur on one or more training assignments and may involve more than one evaluator during any opportunity.

### **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.

Tasks within the PTB are numbered sequentially; however, the numbering does NOT indicate the order in which the tasks need to be performed or evaluated.

The bullets under each numbered task are examples or indicators of items or actions related to the task. The purpose of the bullets is to assist the evaluator in evaluating the trainee; the bullets are not all-inclusive. Evaluate and initial ONLY the numbered tasks. DO NOT evaluate and initial each individual bullet.

A more detailed description of this process and definitions of terms are included in the *Wildland Fire Qualification System Guide*, PMS 310-1. This document can be found at <https://www.nwcg.gov/publications/310-1>.

## **RESPONSIBILITIES**

The responsibilities of the Home Unit/Agency, Trainee, Coach, Training Specialist, Evaluator, Final Evaluator and Certifying Official are identified in the *Wildland Fire Qualification System Guide*, PMS 310-1. It is incumbent upon each of these individuals to ensure their responsibilities are met.

## **INSTRUCTIONS FOR THE POSITION TASK BOOK EVALUATION RECORD**

### **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).

**Fire Behavior Prediction System (FBPS) Fuel Model Group:** Circle the Fuel Model Group letter that corresponds to the predominant fuel type in which the incident/event occurred.

**G = Grass Group** (includes FBPS Fuel Models 1 – 3):

1 = short grass (1 foot); 2 = timber with grass understory; 3 = tall grass (1½ - 2 feet)

**B = Brush Group** (includes FBPS Fuel Models 4 – 6):

4 = Chaparral (6 feet); 5 = Brush (2 feet); 6 = dormant brush/hardwood slash;

7 = Southern rough

**T = Timber Group** (includes FBPS Fuel Models 8 – 10)

8 = closed timber litter; 9 = hardwood litter; 10 = timber (with litter understory)

**S = Slash Group** (includes FBPS Fuel Models 11 – 13)

11 = light logging slash; 12 = medium logging slash; 13 = heavy logging slash

**Evaluator’s Recommendation**

For 1 – 4, initial only one line as appropriate; this will allow for comparison with your initials in the Qualifications Record.

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

**Evaluator’s Signature**

Sign here to authenticate your recommendations.

**Date**

Document the date the Evaluation Record is being completed.

**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.

## Base Camp Manager (BCMG)

### Competency: Assume position responsibilities.

*Description: Successfully assume role of Base Camp Manager and initiate position activities at the appropriate time according to the following behaviors.*

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
<b>Behavior: Ensure readiness for assignment.</b>			
1. Obtain and assemble information and materials needed for kit. Suggested items: <ul style="list-style-type: none"> <li>• <i>PMS 410-1, Fireline Handbook</i></li> <li>• <i>J-254, BCMG Job Aid with checklists</i></li> <li>• <i>OF 297, Emergency Equipment Shift Ticket</i></li> <li>• <i>Crew Time Reports</i></li> <li>• <i>Measuring tape</i></li> <li>• <i>Grid sheets</i></li> <li>• <i>Duct tape</i></li> <li>• <i>Flagging</i></li> </ul>	O		
2. Obtain complete information from dispatch upon assignment. <ul style="list-style-type: none"> <li>• <i>Incident name</i></li> <li>• <i>Incident order number</i></li> <li>• <i>Request number</i></li> <li>• <i>Incident phone number</i></li> <li>• <i>Reporting time</i></li> <li>• <i>Reporting location</i></li> <li>• <i>Transportation arrangements/travel routes</i></li> <li>• <i>Contact procedures during travel (telephone/radio)</i></li> </ul>	O		
3. Arrive at incident and check in. <ul style="list-style-type: none"> <li>• <i>Arrive properly equipped at assigned location within acceptable time limits.</i></li> </ul>	I		

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

## Base Camp Manager (BCMG)

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
<b>Behavior: Ensure availability, qualifications, and capabilities of resources to complete assignment</b>			
4. Coordinate with Facilities Unit Leader to obtain necessary incident facility staffing levels and needed supplies and materials. <ul style="list-style-type: none"> <li>• <i>Anticipated future conditions (e.g., weather, escalation/de-escalation, type and quantity of equipment, ingress/egress).</i></li> <li>• <i>Food service.</i></li> </ul>	I		
<b>Behavior: Gather, update, and apply situational information relevant to the assignment.</b>			
5. Obtain initial briefing from Facilities Unit Leader or immediate supervisor. <ul style="list-style-type: none"> <li>• <i>Priorities for incident facilities</i></li> <li>• <i>Specific needs of incident personnel for facility establishment</i></li> <li>• <i>Type of incident and expected duration</i></li> <li>• <i>Current and expected resource commitments</i></li> <li>• <i>Current incident status</i></li> <li>• <i>Weather, current and expected</i></li> <li>• <i>Phone, radio, contact procedures</i></li> <li>• <i>Jurisdictional agency</i></li> <li>• <i>Work schedule</i></li> <li>• <i>Policies and operating procedures</i></li> <li>• <i>Cultural, environmental, and Threatened and Endangered Species concerns</i></li> <li>• <i>Proper ordering procedures</i></li> <li>• <i>Safety concerns</i></li> <li>• <i>Location of incident facilities (private/agency)</i></li> <li>• <i>Copy of Incident Action Plan (IAP) or relevant plan</i></li> </ul>	I		
<b>Behavior: Establish effective relationships with relevant personnel.</b>			
6. Conduct self in a professional manner. <ul style="list-style-type: none"> <li>• <i>Respectful and courteous.</i></li> <li>• <i>Respectful of public and private property.</i></li> </ul>	I		

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## Base Camp Manager (BCMG)

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
7. Establish and maintain positive interpersonal and interagency working relationships.	I		
<b>Behavior: Establish organization structure, reporting procedures, and chain of command of assigned resources.</b>			
8. Organize assigned personnel to meet the needs of the unit.	I		
<b>Behavior: Understand and comply with ICS concepts and principles.</b>			
9. Apply the ICS. <ul style="list-style-type: none"> <li>• <i>Follow chain of command.</i></li> <li>• <i>Maintain appropriate span of control.</i></li> <li>• <i>Use appropriate ICS forms.</i></li> <li>• <i>Use appropriate ICS terminology.</i></li> </ul>	I		

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



## Base Camp Manager (BCMG)

### Competency: Lead assigned personnel.

*Description: Influence, guide, and direct assigned personnel to accomplish objectives and desired outcomes in a rapidly changing, high-risk environment.*

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
<b>Behavior: Model leadership values and principles.</b>			
10. Exhibit principles of duty. <ul style="list-style-type: none"> <li>• <i>Be proficient in your job, both technically and as a leader.</i></li> <li>• <i>Make sound and timely decisions.</i></li> <li>• <i>Ensure tasks are understood, supervised and accomplished.</i></li> <li>• <i>Develop your subordinates for the future.</i></li> </ul>	I		
11. Exhibit principles of respect. <ul style="list-style-type: none"> <li>• <i>Know your subordinates and look out for their well-being.</i></li> <li>• <i>Keep your subordinates informed.</i></li> <li>• <i>Build the team.</i></li> <li>• <i>Employ your subordinates in accordance with their capabilities.</i></li> </ul>	I		
12. Exhibit principles of integrity. <ul style="list-style-type: none"> <li>• <i>Know yourself and seek improvement.</i></li> <li>• <i>Seek responsibility and accept responsibility for your actions.</i></li> <li>• <i>Set the example.</i></li> </ul>	I		
<b>Behavior: Ensure the safety, welfare, and accountability of assigned personnel.</b>			
13. Provide for the safety and welfare of assigned resources. <ul style="list-style-type: none"> <li>• <i>Recognize, mitigate and communicate potentially hazardous situations.</i></li> <li>• <i>Monitor condition of assigned resources.</i></li> <li>• <i>Account for assigned resources.</i></li> </ul>	I		

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## Base Camp Manager (BCMG)

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
<b>Behavior: Establish work assignments and performance expectations, monitor performance, and provide feedback.</b>			
14. Complete daily review of staffing requirements.	I		
15. Develop schedule/assignments based on IAP or relevant plan.	I		
16. Ensure subordinates understand assignment for operational period. <ul style="list-style-type: none"> <li>• <i>Provide clear, concise instructions and allow for feedback.</i></li> <li>• <i>Adhere to Department of Labor standards.</i></li> </ul>	I		
17. Continually evaluate performance. <ul style="list-style-type: none"> <li>• <i>Communicate deficiencies immediately and take corrective action.</i></li> <li>• <i>Provide training opportunities where available.</i></li> <li>• <i>Complete personnel performance evaluations according to agency guidelines.</i></li> </ul>	I		
<b>Behavior: Emphasize teamwork.</b>			
18. Establish cohesiveness among assigned resources. <ul style="list-style-type: none"> <li>• <i>Provide for open communication.</i></li> <li>• <i>Seek commitment.</i></li> <li>• <i>Set expectations for accountability.</i></li> <li>• <i>Focus on the team result.</i></li> </ul>	I		

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## Base Camp Manager (BCMG)

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
<b>Behavior: Coordinate interdependent activities.</b>			
19. Coordinate with Facilities Unit Leader to establish incident facilities (e.g., Incident Command Post (ICP), base, camp, helibase, staging areas). <ul style="list-style-type: none"> <li>• <i>Incident facility map and signs.</i></li> <li>• <i>Safe traffic/personnel flow.</i></li> <li>• <i>Functional needs and location for units/sections.</i></li> <li>• <i>Sanitation facilities/services (garbage, portable toilets).</i></li> <li>• <i>Food service, shower and sleeping locations.</i></li> <li>• <i>Contingency plan for wet weather, equipment breakdown, unanticipated fire behavior or inversion.</i></li> </ul>	I		
20. Coordinate with other appropriate unit leaders. <ul style="list-style-type: none"> <li>• <i>Backhaul</i></li> <li>• <i>Supply delivery</i></li> <li>• <i>Food delivery</i></li> <li>• <i>Time reports</i></li> <li>• <i>Safety concerns</i></li> </ul>	I		
21. Coordinate with Facilities Unit Leader and provide a list of excess personnel, supplies and services. <ul style="list-style-type: none"> <li>• <i>Review list daily.</i></li> </ul>	I		
22. Coordinate release and return of facilities and equipment with Facilities Unit Leader and Finance/Administration Section.	I		
23. Coordinate with Facilities Unit Leader and resource advisor to meet the standards of the rehabilitation plan relating to incident facilities areas.	I		

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

## Base Camp Manager (BCMG)

### 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
<b>Behavior: Ensure relevant information is exchanged during briefings and debriefings.</b>			
24. Brief and keep subordinates informed and updated.	I		
25. Participate in functional area briefings and unit After Action Reviews (AARs).	I		
<b>Behavior: Ensure documentation is complete and disposition is appropriate.</b>			
26. Submit completed original documents at appropriate time (e.g., each operational period, final package). <ul style="list-style-type: none"> <li>• ICS 213, General Message</li> <li>• ICS 214, Unit Log</li> </ul>	I		
27. Ensure shift tickets are finalized and submitted to Finance Section.	I		
<b>Behavior: Gather, produce and distribute information as required by established guidelines and ensure understanding by recipient.</b>			
28. Prepare information for briefings and meetings.	I		
29. Determine and monitor current status of incident facilities and relay to appropriate incident personnel.	I		
30. Confirm estimated time of arrival of staff, equipment, and supplies.	I		
<b>Behavior: Communicate and ensure understanding of work expectations within the chain of command and across functional areas.</b>			
31. Coordinate across functional areas. <ul style="list-style-type: none"> <li>• Provide timely feedback in response to requests.</li> </ul>	I		

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## Base Camp Manager (BCMG)

### Competency: Ensure completion of assigned actions to meet identified objectives.

*Description: Identify, analyze, and apply relevant situational information and evaluate actions to complete assignments safely and meet identified objectives. Complete actions within established timeframe.*

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
<b>Behavior: Administer and/or apply agency policy, contracts and agreements.</b>			
32. Coordinate with Finance/Administration Section and Facilities Unit Leader on incident facilities contracts/agreements for services, equipment, and personnel. <ul style="list-style-type: none"> <li>• <i>Ensure non-agency services and equipment have current contracts/agreements.</i></li> <li>• <i>Read and be familiar with contracts/agreements.</i></li> <li>• <i>Conduct pre-/post-use inspections of equipment, supplies and services and document.</i></li> <li>• <i>Maintain shift tickets for assigned services and equipment as per contract/agreement.</i></li> <li>• <i>Comply with rental equipment, incident facility, and land use agreements.</i></li> </ul>	I		
<b>Behavior: Gather, analyze, and validate information pertinent to the incident or event and make recommendations for setting priorities.</b>			
33. Provide daily inspections of facilities for compliance with applicable safety and health regulations.	I		
<b>Behavior: Modify approach based on evaluation of incident situation.</b>			
34. Adapt facilities to current or anticipated conditions.	I		
<b>Behavior: Follow established procedures and/or safety procedures relevant to given assignment.</b>			
35. Ensure compliance with applicable health and safety regulations.	I		

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

## Base Camp Manager (BCMG)

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
<b>Behavior: Provide logistical support as necessary.</b>			
36. Provide necessary facilities maintenance services. <ul style="list-style-type: none"> <li>• <i>Sanitation</i></li> <li>• <i>Lighting</i></li> <li>• <i>Clean up</i></li> <li>• <i>Potable water</i></li> </ul>	I		
<b>Behavior: Transfer position duties while ensuring continuity of authority and knowledge and taking into account the increasing or decreasing incident complexity.</b>			
37. Coordinate an efficient transfer of position duties when mobilizing/demobilizing (e.g., incoming Incident Management Team (IMT), host agency). <ul style="list-style-type: none"> <li>• <i>Inform subordinate staff and IC.</i></li> <li>• <i>Document follow-up action needed and submit to supervisor.</i></li> </ul>	I		
<b>Behavior: Plan for demobilization and ensure demobilization procedures are followed.</b>			
38. Demobilize equipment. <ul style="list-style-type: none"> <li>• <i>Prepare equipment/services for release.</i></li> <li>• <i>Notify contractors/vendors of impending release schedule.</i></li> </ul>	I		
39. Anticipate demobilization of resources. <ul style="list-style-type: none"> <li>• <i>Identify excess resources.</i></li> <li>• <i>Prepare schedule for demobilization.</i></li> </ul>	I		
40. Demobilize and check out. <ul style="list-style-type: none"> <li>• <i>Receive demobilization instructions from incident supervisor.</i></li> <li>• <i>If required, complete ICS 221, Demobilization Checkout and submit completed form to the appropriate person.</i></li> </ul>	I		
41. Ensure demobilization of resources. <ul style="list-style-type: none"> <li>• <i>Brief subordinate staff on demobilization procedures and responsibilities.</i></li> <li>• <i>Ensure incident and agency demobilization procedures are followed.</i></li> </ul>	I		

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**Trainee Information**

Printed Name:

Trainee Position on Incident/Event:

Home Unit/Agency:

Home Unit /Agency Address and Phone Number:

**Evaluator Information**

Printed Name:

Evaluator Position on Incident/Event:

Home Unit/Agency:

Home Unit /Agency Address and Phone Number:

**Incident/Event Information**

Incident/Event Name:

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  
OR 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): \_\_\_\_\_

**Trainee Information**

Printed Name:

Trainee Position on Incident/Event:

Home Unit/Agency:

Home Unit /Agency Address and Phone Number:

**Evaluator Information**

Printed Name:

Evaluator Position on Incident/Event:

Home Unit/Agency:

Home Unit /Agency Address and Phone Number:

**Incident/Event Information**

Incident/Event Name:

Reference (Incident Number/Fire Code):

Duration:

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- \_\_\_\_\_ **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): \_\_\_\_\_