A Publication of the **National Wildfire Coordinating Group** 

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



# AIRCRAFT TIMEKEEPER (ATIM)

PMS 311-93 October 2018

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:

# **AIRCRAFT TIMEKEEPER (ATIM)**

#### Final Evaluator's Verification

To be completed <b>ONLY</b> 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:

This document is posted at the NWCG website: <a href="https://www.nwcg.gov/publications/position-taskbooks">https://www.nwcg.gov/publications/position-taskbooks</a>

# 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 RX = 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 *NIMS Wildland Fire Qualification System Guide*, PMS 310-1. This document can be found at <a href="https://www.nwcg.gov/publications/310-1">https://www.nwcg.gov/publications/310-1</a>.

#### 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) <u>or</u> 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.

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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
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#### **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.

#### **Comments**

Additional information specific to the evaluator's recommendation. The evaluator should note any deficiencies, additional assignment needs, or additional focus areas that were identified.

#### **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.

### **Competency: Assume position responsibilities**

Description: Successfully assume role of Aircraft Timekeeper and initiate position activities at the appropriate time according to the following behaviors.

TASK	C O D	EVAL. RECORD #	EVALUATOR: Initial & date upon completion	
Behavior: Preparedness for assignment and appropriate travel activities.				
Benavior: Trepareuness for assignment and appropri	liaic ii a	ver activities	•	
1. Obtain and assemble information and materials needed for assignment.	О			
<ul> <li>Travel for assignment.</li> <li>Obtain information from dispatch upon assignment  <ul> <li>Incident name</li> <li>Incident order number</li> <li>Request number</li> <li>Reporting time</li> <li>Reporting location</li> <li>Transportation arrangements</li> <li>Contact procedures during travel</li> <li>Authorization for use of equipment (radio, headset, laptop, cell phone, rental vehicle)</li> </ul> </li> <li>Behavior: Gather, update, and apply situational info</li> </ul>	ormation	relevant to	the assignment.	
<ul> <li>3. Obtain initial briefing from Airtanker/Fixed-Wing Base Manager or supervisor.</li> <li>Local administrative guidelines</li> <li>Resources assigned and ordered for the incident</li> <li>Expectations</li> <li>Copy of the local base supplement and other relevant plans <ul> <li>Retardant Hot Loading Plan</li> <li>Simultaneous Loading and Fueling Plan</li> <li>Emergency Response Plan</li> <li>Local Ramp Management Plan</li> <li>Smokejumper Operations Plan</li> <li>Other plans</li> </ul> </li> <li>Unit specific information</li> </ul>	I			
Behavior: Establish effective relationships with relevant personnel.				
<ul> <li>4. Demonstrate professionalism.</li> <li>• Integrate in a diverse work environment</li> <li>• Respectful and courteous</li> <li>• Respectful of public and private property</li> </ul>	I			

	TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
	Establish and maintain positive interpersonal and interagency working relationships.  • Agency and contract personnel  • Fixed Base Operators (FBO)  • Airport Management	I		
	Demonstrates knowledge of agency policy and appropriate behavior while on assignment.	I		
Beh	avior: Understand and comply with ICS concept	ts and p	rinciples.	
7. ]	Follow chain of command.	I		
8. 1	Follow safety guidelines.  Familiarize on local safety supplements, procedures, and protocols, known hazards, etc.  Enforce established safety guidelines  Identify and correct unsafe actions or conditions  Mitigate or correct hazards and safety concerns at the lowest level	I		
9. 1	Decision making.  • Demonstrates sound decision making in complex situations and under stress	I		
10. 0	<ul> <li>Coordinate with Airtanker/Fixed-Wing Base Manager.</li> <li>Ensures assigned area of responsibility is maintained and monitored for duration of operational period</li> <li>Acquires necessary materials to accomplish timekeeping tasks</li> </ul>	I		

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>11. Timekeeping operations.</li> <li>Demonstrates organizational skills while recording "real time" data at the airtanker/fixed-wing base</li> <li>Demonstrates proficiency with various computer applications determined by agency and airtanker/fixed-wing base management</li> <li>Acquires incident information for appropriate cost coding</li> <li>Records aircraft contract activity (e.g., roll, and stop time, availability, unavailability, etc.)</li> <li>Records retardant contract activity (e.g., number of gallons per aircraft load, duty day hours, extended standby, etc.)</li> <li>Records additional costs related to airtanker/fixed-wing base operations (e.g., landing fees, tie-down fees, etc.)</li> <li>Maintains a daily log. Records staffing, pertinent communications, events, etc.</li> <li>Completes other forms or documentation as directed</li> <li>Compiles cost information on a daily basis for accrual reporting</li> <li>Disperses aircraft contract documentation and cost accruals to Contracting Officer's Representatives, Dispatch Centers, Teams, etc.</li> </ul>	I		

### **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: Coordinate and manage the use of multiple	le frequ	encies, radio	s, and telephones.
<ul> <li>12. Maintain radio or message links with appropriate incident functions.</li> <li>Airtankers, lead planes, air attacks, smokejumper planes, crew transport, helicopters</li> <li>Dispatch, GACC</li> </ul>	I		
<ul> <li>13. Verify radio frequencies daily with supervisor, dispatch, GACC, and IAP.</li> <li>Request assigned frequencies if none were provided</li> </ul>	I		
Behavior: Ensure functionality of equipment.			
<ul> <li>14. Check assigned equipment prior to daily operations.</li> <li>Perform radio checks with dispatch, ramp personnel, and aircrews</li> </ul>	I		
Behavior: Follow established procedures and/or safe assignment.	ety proc	edures relev	ant to given
<ul> <li>15. Review and understand emergency response plans.</li> <li>Notify Airtanker/Fixed-Wing Base Manager of any issues affecting airport or base operations</li> </ul>	О		
16. Notify Airtanker/Fixed-Wing Base Manager immediately of any overdue or missing aircraft.	О		
Behavior: Ensure relevant information is exchanged	during	briefings an	d debriefings.
<ul> <li>17. Attend briefings and meetings as directed.</li> <li>Provide information as requested</li> <li>Keep Airtanker/Fixed-Wing Base Manager informed on issues and potential problems</li> </ul>	I		

	Evaluation Record #
	Trainee Information
Printed Nar	me:
Trainee Pos	sition on Incident/Event:
Home Unit	/Agency:
Home Unit	/Agency Address and Phone Number:
	Evaluator Information
Printed Nar	me:
Evaluator P	Position on Incident/Event:
Home Unit	/Agency:
Home Unit	/Agency Address and Phone Number:
	Incident/Event Information
Incident/Ev	rent Name: Reference (Incident Number/Fire Code):
Duration:	
Incident Ki	nd: Wildfire, Prescribed Fire, All Hazard, Other (specify):
Location (in	nclude Geographic Area, Agency, and State):
Managemen	nt Type (circle one): Type 5, Type 4, Type 3, Type 2, Type 1, Area Command
	bed 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.
Comments:	

Evaluator's Signature:\_\_\_\_\_\_ Date:\_\_\_\_\_

Evaluator's Relevant Qualification (or agency certification):

	Eval	uation Record #
	Trainee Information	
Printed Na	Name:	
Trainee Po	Position on Incident/Event:	
Home Unit	nit/Agency:	
Home Unit	nit /Agency Address and Phone Number:	
	Evaluator Information	
Printed Na	Name:	
Evaluator l	r Position on Incident/Event:	
Home Unit	nit/Agency:	
Home Unit	nit /Agency Address and Phone Number:	
	Incident/Event Information	
Incident/E	Event Name: Reference (Incident Number/Fire Code):	
Duration:	:	
Incident K	Kind: Wildfire, Prescribed Fire, All Hazard, Other (specify):	
Location (i	(include Geographic Area, Agency, and State):	
_	ment Type (circle one): Type 5, Type 4, Type 3, Type 2, Type 1, Area Command	
	cribed Fire Complexity Level (circle one): Low, Moderate, High	
FBPS Fuel	el 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 perform a satisfactory manner. The trainee has successfully performed all tasks in the PTB completed the Final Evaluator's Verification section and recommend the trainee b certification.	for the position. I have
2)	2) The tasks initialed and dated by me on the Qualification Record have been perform a satisfactory manner. However, opportunities were not available for all tasks (or a performed and evaluated on this assignment. An additional assignment is needed to	all uncompleted tasks) to be
3)	3) The trainee did not complete certain tasks in the PTB in a satisfactory manner and guidance, or experience is recommended.	additional training,
4)	The individual is severely deficient in the performance of tasks in the PTB for the training, guidance, or experience is recommended prior to another training assignment.	
Comments	its:	

Evaluator's Signature:\_\_\_\_\_\_ Date:\_\_\_\_\_

Evaluator's Relevant Qualification (or agency certification):