

SPECIALTY QUALIFICATION TRAINING RECORD (SQTR)
Incident Commander - Level 2

NAME (Last, First, MI)	CAPID	DATE ISSUED
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Prerequisites

Item Date Completed
Qualified Incident Commander 3

The above listed member has completed the required prerequisite training for the incident commander - level 2 specialty.

UNIT/WING/REGION COMMANDER OR
AUTHORIZED DESIGNEE'S SIGNATURE _____
DATE

Familiarization and Preparatory Training

Task Evaluator's CAPID and
Date Completed

Complete NIIMS G193 or equivalent

Complete NIIMS G195

The above listed member has completed the required familiarization and preparatory training requirements for the incident commander - level 2 specialty qualification and is authorized to serve in that specialty while supervised on training or actual missions.

UNIT/WING/REGION COMMANDER OR
AUTHORIZED DESIGNEE'S SIGNATURE _____
DATE

Advanced Training

Task Evaluator's CAPID and
Date Completed

Complete the appropriate portion of CAPT 117, *Emergency Services Continuing Education examinations*

Exercise Participation

The above listed member satisfactorily participated as a incident commander - level 2 trainee under my direct supervision on mission number _____.

QUALIFIED SUPERVISOR'S SIGNATURE _____
DATE

The above listed member satisfactorily participated as a incident commander - level 2 trainee under my direct supervision on mission number _____.

QUALIFIED SUPERVISOR'S SIGNATURE _____
DATE

Unit Certification and Recommendation

The above listed member has completed the requirements for the incident commander - level 2 specialty qualification and is authorized to serve in that specialty on training or actual missions.

UNIT/WING/REGION COMMANDER OR
AUTHORIZED DESIGNEE'S SIGNATURE _____
DATE