



How to fill out a taskbook correctly

Covering common mistakes that hold up taskbook review

**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.

INCIDENT / EVENT CODING

- When signing in a taskbook, each task has this code identified.
- The incident / event being given credit must be applicable to the code listed on the task.
- For example, an evaluator should not give credit for experience gained on a hurricane response for a W or RX coded task.
- Evaluators and trainees should both carefully review these codes to make sure tasks are credited properly.
- Tasks signed off on incidents / events that do not meet the code requirements are rejected.

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 <http://www.nwccg.gov/pms/docs/docs.htm>.

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).

INCIDENT / EVENT INFORMATION

- This information is required and needs to be documented with detail.
- Evaluators should provide enough information so that the TFS Certification Committee can make an accurate assessment of an employee's gained experience.
- A taskbook's review status will be put on hold if not enough information is provided. Evaluators will have to be contacted and asked to correctly complete the evaluators page or provide more detailed information.
- The purpose of this information is to paint a picture of the experience an employee has gained. If left blank, it looks like nothing happened.
- Wildfire Management Type and Prescribed Fire Complexity Level are TWO different types of levels. Choose the correct one for the event.

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. 	I	#1 RF #2 #3 #5 #7	RF 02-01-17 SC 3-26-18 RF 02-03-17 RF 02-13-17 5/5/17 BH 10/20/17
Behavior: Establish work assignments and performance expectations, monitor performance, and provide feedback.			
19. Complete daily review of staffing requirements.	I	#3 #5 #4	RF 02-13-17 5/5/17 DB 3-10-17
20. Develop schedule/assignments based on Incident Action Plan (IAP) or relevant plan.	I	#1 #5 #4	RF 02-01-17 5/5/17 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. 	I	#1 #5 #2 #7 #4 RF	RF 02-01-17 5/5/17 RF 02-03-17 BH 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. 	I	#1 #2 #5 #7 #9	RF 02-01-17 RF 02-03-17 5/5/17 BH 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. 	I	#1 #2 #3 #4 #5 #7 #9	RF 02-01-17 RF 02-03-17 RF 02-13-17 DB 3-10-17 5/5/17 BH 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.

Printed Name: [Redacted] **Trainee Information**

Trainee Position on Incident/Event: HEQB(4)

Home Unit/Agency: FREDERICKSBURG/TFS

Home Unit / Agency Address and Phone Number: 100 BUSINESS CRT-FBGS TX 78624 / 830-997-5426

Printed Name: [Redacted] **Evaluator Information**

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-TXS-18902

Duration: 3/15/18 - 8 HOURS

Incident Kind: Wildfire, Prescribed Fire, All Hazard, Other (specify):

Location (include Geographic Area, Agency, and State): PAN-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)

pl
✓ 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: [Redacted] Date: 4-6-18

Evaluator's Relevant Agency/Department: TFLD, SOF2, DIVS

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

NWCG GOOD – Initial Attack Fire

- Notice all sections have been filled in completely, some evaluation pages may or 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 it 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.

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	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.

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 ENGB(t)		6. Date of Assignment From: 02-09-17 To: 02-10-17		7. Acres Burned 940				8. Fuel Type(s) 1,2,6									
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	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																	
<p> handled this incident very well. We attacked active fire with the engine during night operations and were able to make a good stop. He worked well with local fire departments along with our crew. Second day of operation, conducted a burn out operation and had positive results. I appreciate in how he handles the situations as given and remains with a positive attitude to get the objectives complete. Crew members listen to when he gives orders and they are reassured with direction and tone that everything is being handled in the best way possible. Safety is always in place in direction which is something very nice to know that is being over watched and reminded during all operations. Job well done. I have no issues on how is proceeding through his single resource.</p>																	
discussed with me										12. Date							
Unit (address)										15. Position of Fire							
ENGB										16. Date							
										02-13-17							

ICS 225 GOOD EXAMPLE

- The incident number was listed.
- The correct Location information was included.
- Rating is clearly marked for tasks performed during assignment.
- Remarks are clearly listed on the tasks the trainee preformed and an explanation of the rating given are clear.
- IF you (trainee) have a supervisor change through your assignment, you can get two evaluations from them both **BUT** not for the same or overlapping dates.
- Evaluators should not give an evaluation for the same dates that another evaluator already has. It voids your evaluation, essentially this is an attempt to get dual credit for the same experience. This is NOT accepted.
- Be sure that you as the trainee both sign and date the evaluation or it will be sent back.
- Be sure that the evaluator also sings and dates the evaluation.

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 (T) 6. Date of Assignment From: 3/8/18 To: 3/8/18 7. Acres Burned: 128 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				Mop-Up				Camp				Other (Specify)			
	0	1	2	3	0	1	2	3	0	1	2	3	0	1	2	3
Knowledge of the job																X
Ability to obtain performance															X	
Attitude															X	
Decisions under stress															X	
Initiative															X	
Consideration for personnel welfare															X	
Obtain necessary equipment and supplies															X	
Physical ability for the job															X	
Safety															X	
Other (specify)															X	

10. Remarks: [Redacted] did a good job putting in line on the [Redacted] fire. Smooth, driveable 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: DZ14 / He ab(t) 16. Date: 3-17-19

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.

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: WEST MIMS/ [REDACTED]

3. Home Unit (address): [REDACTED] 4. Location of Fire (address): [REDACTED]

5. Fire Position: FFT2 / ENOP / FF (1) 6. Date of Assignment: From: 4/17/17 To: 5/6/17 7. Acres Burned: 143,000 8. Fuel Type(s): G, A, B, 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.

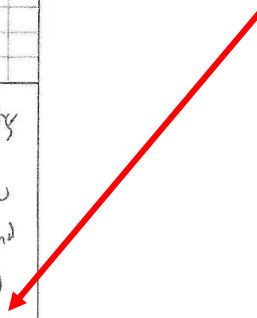
Rating Factors	Hot Line				Mop-Up				Camp				Other (Specify)			
	0	1	2	3	0	1	2	3	0	1	2	3	0	1	2	3
Knowledge of the job			X				X									
Ability to obtain performance			X				X									
Attitude			X				X									
Decisions under stress			X				X									
Initiative			X				X									
Consideration for personnel 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: [REDACTED] Did a remarkable job on this assignment. His ability to adapt to a new fuel type was awesome. He listen to direction very well and always was the one to speak up when he saw a concern. He played a huge role as my assistant on the engine and there was never a time that I wasn't proud of his decision making during stressful and non stressful situations. My biggest recommendation is he expands his firefighting career to new terrain and fuel types.
Great job [REDACTED]

11. Employee (signature): [REDACTED] This rating has been discussed with me 12. Date: [REDACTED]

13. Rate By (signature): [REDACTED] 14. Home Unit (address): [REDACTED] 15. Position of Fire: ENG B 16. Date: 5-11-17

Another example of how to show recommendations in the remarks, while stating the good points that were made during that assignment.



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
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): HEQB

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.

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 FFT2	6. Date of Assignment From: 01/06/2017 To: 01/06/2017		7. Acres Burned 4	8. Fuel Type(s) Pine													
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	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 ██████████ has recently completed S-130/190 and is beginning his career. He has taken that knowledge from the course and is able to transfer the knowledge to the field. ██████████ has a positive attitude on the fireline and is not afraid to ask question and listen to input. ██████████ should continue to listen to others within the wildland environment and continue to respond to wildfires. I would recommend initiating his FFT1/ICT5 taskbook.																	
11. Employee (signature) This rating has been discussed with me ██████████												12. Date 2/6/17					
13. Rate By (signature) ██████████		14. Home Unit (address) ██████████		15. Position of Fire ICT5				16. Date 02/06/17									

CONTRADICTING EVALUATION

- All information is filled out correctly.
- However, when you read the remarks and compare them to the rating factors the remarks contradict what is selected in the rating factors.
- Is this individual really ready to take the next step based on the rating factor?

GOOD Example

TFS HEO PTB

TRAINEE NAME: <u>Jane Smith</u>		TRAINEE POSITION: <u>DZOP</u>			
# <u>1</u> Evaluator's name: <u>John Doe</u>		Incident/office title & agency: <u>Resource Specialist / TFS</u>			
Evaluator's home unit address & phone: <u>123 Dozer Street, Doeville, TX 99999</u>					
Name and Location of Incident or Simulation (agency & area)	Incident Kind (wildland fire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Prescribed Fire Complexity Level	NFFL Fuel Model(s)
<u>NC-NCS-00000 Big Rock Fire</u>	<u>Wildfire</u>	<u>(1) Type 2 Dozer</u>	<u>1/5/17 to 1/20/17</u>	<u>Type 3</u>	<u>3, 8, 13</u>
The tasks initialed & 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 checked="" 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: <u>Jane gained sufficient operator seat time, however most of assignment was in staging. Conducted daily equipment read readiness checks. Very confident around equipment and keeps maintained.</u>					
Date: <u>1/20/17</u> Evaluator's initials: <u>JD</u> Evaluator's Signature: <u>John Doe</u>					
Evaluator's relevant red card (or agency certification) rating: <u>DZOP, DZIA, TPOP, TPJA</u>					
Equipment Operated for Qualification Check					
Type Tractor Plow (circle one): T1 (D7, JD850); <u>T2 (D6N, JD750, TD15)</u> ; T3 (D5H, D4H, TD12); T4 (JD650, JD550); T5 (JD450); T6 (JD400, JD350)				Hours of operation:	
Type Dozer (circle one): T1 (D8H, D7H, JD850); <u>T2 (D6N, JD750, TD15, JD650, D5K)</u> ; T3 (JD550, JD450J)				Hours of operation: <u>30</u>	
Type Motor Grader (circle one): <u>Steering wheel</u> Joystick				Hours of operation:	
Blade (circle type): Straight V-blade <u>VPAT folding blade</u> Shear KG convertible				Hours of operation: <u>30</u>	
Attachments (circle one): Rippers Winch				Hours of operation:	
Transport (make/model): <u>Mack</u>				Hours of operation: <u>40</u>	
Transport (circle one): Single axle <u>Tandem axle</u>				Hours of operation: <u>40</u>	
Type transmission (circle one): Automatic Manual: 6 speed, 10 speed, <u>13 speed</u>				Hours of operation: <u>40</u>	
Trailer (make/model): <u>Large trailer</u> Pintle hook Drop neck trailer				Hours of operation: <u>40</u>	

Texas SPECIFIC PTBs (Engine Operator) GOOD EXAMPLE

- All blocks are appropriately filled in.
- Notes were provided about the assignment and trainee's performance.
- Even though this example is a 15 day assignment, there were only 30 actual operator hours noted. Hours operated are not the same as hours on shift.

GOOD Example

TFS HEO PTB

TRAINEE NAME: <u>Jane Smith</u>		TRAINEE POSITION: <u>DZOP</u>			
# <u>2</u> Evaluator's name: <u>John Doe</u>		Incident/office title & agency: <u>Resource Specialist / TFS</u>			
Evaluator's home unit address & phone: <u>123 Dozer Street, Doeville, TX 99999</u>					
Name and Location of Incident or Simulation (agency & area)	Incident Kind (wildland fire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Prescribed Fire Complexity Level	NFFL Fuel Model(s)
<u>Doeville ofc site prep</u>	<u>training</u>	<u>(1) Type 2 Dozer</u>	<u>1/25/17 to 2/14/17</u>	<u>N/A</u>	<u>7</u>
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 checked="" 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: <u>Conducted training by using office site prep area as opportunity. worked few hours every morning during M-F and then dozer was available for afternoon IA. Blading has significantly improved!</u>					
Date: <u>2/14/17</u> Evaluator's initials: <u>JD</u> Evaluator's Signature: <u>John Doe</u>					
Evaluator's relevant red card (or agency certification) rating: <u>DZOP, DZTA</u>					
Equipment Operated for Qualification Check					
Type Tractor Plow (circle one): T1 (D7, JD850); T2 (D6, JD750, TD15); T3 (D5H, D4H, TD12); T4 (JD650, JD550); T5 (JD450); T6 (JD400, JD350)				Hours of operation:	
Type Dozer (circle one): T1 (D8H, D7H, JD850); <u>T2 (D6N, JD750, TD15, JD650, D5K)</u> ; T3 (JD550, JD450J)				Hours of operation: <u>23</u>	
Type Motor Grader (circle one): <u>Steering wheel</u> Joystick				Hours of operation:	
Blade (circle type): Straight V-blade <u>V-PAT folding blade</u> Shear KG convertible				Hours of operation: <u>23</u>	
Attachments (circle one): <u>Rippers</u> Winch				Hours of operation: <u>2</u>	
Transport (make/model): <u>Mack</u>				Hours of operation: <u>2</u>	
Transport (circle one): Single axle <u>Tandem axle</u>				Hours of operation: <u>2</u>	
Type transmission (circle one): Automatic Manual: 6 speed, 10 speed, <u>13 speed</u>				Hours of operation: <u>2</u>	
Trailer (make/model): <u>Large trailer</u> Pintle hook Drop neck trailer				Hours of operation: <u>2</u>	

Texas SPECIFIC PTBs (Engine Operator) GOOD EXAMPLE

BAD Example

TFS HEO PTB

TRAINEE NAME:		TRAINEE POSITION:			
# <u>3</u> Evaluator's name: <u>Joe</u>		Incident/office title & agency:			
Evaluator's home unit address & phone:					
Name and Location of Incident or Simulation (agency & area)	Incident Kind (wildland fire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Prescribed Fire Complexity Level	NFFL Fuel Model(s)
<u>Fire Season</u>			<u>1/30/16 to 2/04/17</u>	<u>Different</u>	<u>411</u>
The tasks initialed & 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 checked="" 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 Signature: <u>Joe Doe</u>					
Evaluator's relevant red card (or agency certification) rating:					
Equipment Operated for Qualification Check					
Type Tractor Plow (circle one): T1 (D7, JD850); T2 (D6, JD750, TD15); T3 (D5H, D4H, TD12); T4 (JD650, JD550); T5 (JD450); T6 (JD400, JD350)			Hours of operation:		
Type Dozer (circle one): T1 (D8H, D7H, JD850); T2 (D6N, JD750, TD15, JD650, D5K); T3 (JD550, JD450J)			Hours of operation: <u>520+ hrs</u>		
Type Motor Grader (circle one): Steering wheel Joystick			Hours of operation:		
Blade (circle type): Straight V-blade VPAT folding blade Shear KG convertible			Hours of operation:		
Attachments (circle one): Rippers Winch			Hours of operation:		
Transport (make/model):			Hours of operation:		
Transport (circle one): Single axle Tandem axle			Hours of operation:		
Type transmission (circle one): Automatic Manual: 6 speed, 10 speed, 13 speed			Hours of operation:		
Trailer (make/model): Large trailer Pintle hook Drop neck trailer			Hours of operation:		

Texas SPECIFIC PTBs (Engine Operator) BAD EXAMPLE

- Most of the basic information is missing.
- This duration is too long.
- There are no specific events listed.
- The evaluator marked the trainee as severely deficient but made no recommendations. This doesn't help the trainee, next evaluator or the committee review the taskbook.
- How can we verify there were actually 500+ hours operated if no specifics were given?

BAD Example

TFS HEO PTB

TRAINEE NAME: <u>Same</u>		TRAINEE POSITION:			
# <u>4</u> Evaluator's name:		Incident/office title & agency:			
Evaluator's home unit address & phone:					
Name and Location of Incident or Simulation (agency & area)	Incident Kind (wildland fire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Prescribed Fire Complexity Level	NFFL Fuel Model(s)
<u>RXB Fire Training</u>		<u>Dozer</u>	<u>2/3/16 to 9/30/16</u>		
<p>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.</p> <p><input type="checkbox"/> The individual has successfully performed all tasks for the position and should be considered for certification.</p> <p><input type="checkbox"/> The individual was not able to complete certain tasks (comments below) or additional guidance is required.</p> <p><input type="checkbox"/> Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.</p> <p><input checked="" 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.</p>					
Recommendations: <u>Did good job.</u>					
Date: <u>9/1/16</u> Evaluator's initials: _____ Evaluator's Signature: <u>Joe Doe</u>					
Evaluator's relevant red card (or agency certification) rating:					
Equipment Operated for Qualification Check					
Type Tractor Plow (circle one): T1 (D7, JD850); T2 (D6, JD750, TD15); T3 (D5H, D4H, TD12); T4 (JD650, JD550); T5 (JD450); T6 (JD400, JD350)			Hours of operation: <u>175+</u>		
Type Dozer (circle one): T1 (D8H, D7H, JD850); T2 (D6N, JD750, TD15, JD650, D5K); T3 (JD550, JD450J)			Hours of operation: <u>250+</u>		
Type Motor Grader (circle one): Steering wheel Joystick			Hours of operation:		
Blade (circle type): Straight V-blade VPAT folding blade Shear KG convertible			Hours of operation:		
Attachments (circle one): Rippers Winch			Hours of operation:		
Transport (make/model):			Hours of operation: <u>600+</u>		
Transport (circle one): Single axle Tandem axle			Hours of operation:		
Type transmission (circle one): Automatic Manual: 6 speed, 10 speed, 13 speed			Hours of operation:		
Trailer (make/model): Large trailer Pintle hook Drop neck trailer			Hours of operation:		

Texas SPECIFIC PTBs (Engine Operator) BAD EXAMPLE

- Basic information is missing.
- Multiple unrelated events / incidents listed without any specific information. These should be separate evaluations with specifics.
- Duration is listed as 7 months and not as specific dates tied to specific events. These should be different evaluations and broken down with specifics.
- The marked recommendations conflicts with the notes portion. This would cause questions and initiate follow up with the evaluator to clarify.
- The evaluator's signature date is before the end of the duration date. Only dates actually observed by the evaluator should be listed.
- How can we verify there were actually 425+ hours operated if no specifics were given?
- Occasionally dates will be listed in place of hours, that will not work. Actual operator hours need to be listed.

Remember...

- Raters need to give honest feedback, that's the only way those who need to improve will know to do so.
- Information not filled in on evaluations will delay taskbook review and approvals.
- Taskbooks are a tool to provide documentation for why a trainee should be qualified in a certain position. Poor documentation by an evaluator will impact the trainee.

COMMON QUESTIONS

When does a taskbook expire?

A TIFMAS PTB (Position Task Book) is valid for 5 years from the day it is initiated. Upon documentation of the first task in the PTB, the 5-year time limit is reset from that new date. If the PTB is not completed in 5 years from the date of the PTB initiation (or first task being evaluated), the PTB will expire.

An extension may be requested, with permission from the Fire Chief or their Designee, with an email to TIFMAS.

Once a taskbook is extended, the trainee must meet all required training in the most current version of PMS 310-1.

Who can sign in my taskbook?

An evaluator must be qualified in the position being evaluated or supervise the Trainee. If the Evaluator supervises the Trainee, but is not qualified in the position, the Evaluator can sign off on tasks, but cannot function as the Final Evaluator.

Trainees in the same position should not be signing for other trainees. Such as a ICT5 trainee signing in another ICT5 trainee's book or a ENGB trainee signing on another ENGB trainee's book.

For Chainsaw (Fallers) There is a list of TIFMAS and TFS **approved final** evaluators. Only these personnel are authorized to sign off on these positions. These lists are updated every year and can be obtained at the [TIFMAS](#) website.

Note: The final evaluator is the last evaluator to sign off tasks in the PTB and signs the verification page. Though not required, it is recommended that the final evaluator complete an ICS 225.

Any Additional documentation should be done on an ICS 225.

FF1 ICT5 can have two different final evaluators.

Can Evaluators reuse the same Eval number?

NO

Evaluators need to use a new number for every new event/incident on a new evaluation record.

What classes are required for my position?

Verify the classes that you need in the TIFMAS Business and Procedures Manual found at [TIFMAS Business Procedures](#) . The current PMS 310-1 can be found here: <https://www.nwcg.gov/publications>.

Position task books can be initiated before attendance and successful completion of required training. Except for the Basic Wildland qualification. Example....You cannot initiate a FF1/ICT5 PTB prior to having acquired the Basic Wildland Qualification.

What are the requirements for opening a taskbook?

A Trainee must be qualified in the prerequisite position prior to the next level taskbook to be initiated. It is recommended that a newly qualified employee serve in that position multiple times before starting the next level to gain sufficient experience.

The taskbook is not considered valid until the Fire Chief or their designee approves the qualification and all documents are submitted to TIFMAS for final review and approval.

Renewal Process

TIFMAS departments will renew their cards (qualifications) as a whole department. Renewal years are every five years starting in 2016. During renewal years the TIFMAS Program will distribute TIFMAS Qualification Re-certification Forms, by email to the agency representative. The renewal forms will be distributed on a rotating schedule throughout the renewal year. Until the department is placed into a 5-year cycle some cards (qualifications) could go beyond the 5-year renewal period. Once the agency receives the renewal notification the agency representative must verify that everyone on the form is:

- Still a member with the department

- Has completed the renewal requirements for the qualification(s) listed per individual.

After reviewed and signed by the agency representative, email it to TIFMAS@tfs.tamu.edu

How to Maintain Currency?

TIFMAS Qualifications shall be renewed every five years. To maintain currency you must follow the guidelines in the latest version of the TIFMAS Business manual and PMS 310-1.

All-Hazards/ Structural

Follow TCFP/SFFMA yearly recertification standards.

Basic Wildland (Firefighter II)

Must complete an annual fireline safety refresher with a (training) Fire shelter deployment.

Engine Operator (ENOP), Firefighter I (FFTI), Engine Boss (ENGB), Strike Team Leader (STEN), ICT4, Task Force Leader (TFLD), and Division Group Supervisor (DIVS).

Must complete at least one ICS-225 Form (Performance Evaluation) within the five year time frame.

One ICS-225 Form in the highest PTB Qualification can maintain currency in lower PTB qualifications.

EX: ICS-225 as an ENGB, will maintain FFTI and ENOP.

Faller 3 (FAL3)

Must complete Saw refresher (course) every 2 years.

What needs to be sent to TIFMAS

- Checkoff sheet for position being applied for
- Completed NWCG taskbook
- Incident Performance Ratings (ICS-225).
- Supporting Documentation

Send to tifmas@tfs.tamu.edu

Who do I contact if I have questions?

Please contact your departments TIFMAS
representative first

You can email tifmas@tfs.tamu.edu