

Date Received:	  <b>TEXAS A&amp;M FOREST SERVICE</b> 200 Technology Way, Suite 1162, College Station, TX 77845-3424 <a href="mailto:tifmas@tfs.tamu.edu">tifmas@tfs.tamu.edu</a> <b>Wildland Engine Operator (ENOP) Qualification Checklist</b>	Date Reviewed:
Applying For:		Approval Level:
TIFMAS National		TIFMAS National

Name:	Agency:
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Applicant Contact Number:
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**Points to consider when reviewing PTB: (Note: This is to be filled out by the department representative)**

Yes	No	
		Position Taskbook (PTB) was properly initiated by Fire Chief or designee and signed Agency Certification.
		PTB has a final evaluator Verification page, signed by a qualified final evaluator, the final evaluator was the last evaluation record and evaluator's recommendation #1 is marked.
		PTB is completely filled out including Names, information, initials, signature, and dates.
		Trainee documents a minimum of one satisfactory ICS 225 performance evaluation with PTB.
		PTB is current and completed within 5 years of the first evaluation, and currency was maintained.
		Trainee documents the minimum of two (2) <i>wildfire</i> evaluations, which provide adequate experience and time for the position being qualified for.
		Trainee documents a minimum of two different evaluators.
		No two evaluation records span the same time frame and every incident or event has its own evaluation record.

**Please insure the applicant has completed the following requirements:**

<p>Qualified NWCG FFT2 (Basic Wildland)</p> <p>Complete a TIFMAS Engine Operator (ENOP) PTB and it has been reviewed by the AHJ and meets the points outlined above.</p> <p>PMS-419 Wildland Engine Operator (At the discretion of TFS, an evaluated equivalency may be substituted)</p> <p>S-211 Portable Pumps and Water use</p>
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Note: Your submittal package must include three items; the completed Position Task Book, the Qualification Checklist, and a minimum of one satisfactory ICS 225 performance evaluation.

**Note: By signing below you are verifying the information above is correct and the applicant has completed all requirements.**

Fire Dept. Representative Signature:	Title:	Date:
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