



# CHECKLIST

ATTACHMENT E

## LOCAL ADVANCED CERTIFICATION

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Agency: \_\_\_\_\_

Email Address: \_\_\_\_\_

FEMA SID# \_\_\_\_\_

Applicant Position:  Appointed Coordinator  Deputy Coordinator  Staff

Course	Date Completed	Certificate Enclosed
1. IS - 3 Radiological Emergency Management		
2. IS - 5 An Introduction to Hazardous Materials		
3. IS - 241 Decision Making and Problem Solving		
4. IS - 242 Effective Communication		
5. IS - 244 Developing and Managing Volunteers		
6. IS - 271 Anticipating Hazardous Weather and Community Risk		
7. IS - 547 Introduction to Continuity of Operations		
8. IS - 702 NIMS Public Information Systems or G - 289 Public Information Officer Awareness		
9. G - 191 ICS / EOC Interface Workshop		
10. ICS - 300 or G-300 Intermediate ICS for Expanding Incidents		
11. Service at the basic certification level for 1 year		
12. Coordinators, Deputy Coordinators, and staff must attend two of the four county quarterly trainings.		
13. Written Endorsement of jurisdiction's county coordinator		

### Local Agency Recommendation

Signature: \_\_\_\_\_

Name, Title \_\_\_\_\_

(Print): \_\_\_\_\_

Agency: \_\_\_\_\_

Date: \_\_\_\_\_

### County Agency Recommendation

Signature: \_\_\_\_\_

Name, Title \_\_\_\_\_

(Print): \_\_\_\_\_

Area Office: \_\_\_\_\_

Date: \_\_\_\_\_

### PEMA Area Office Recommendation

Signature: \_\_\_\_\_

Name, Title \_\_\_\_\_

(Print): \_\_\_\_\_

Area Office: \_\_\_\_\_

Date: \_\_\_\_\_

### PEMA State Training Officer

Signature: \_\_\_\_\_

Name \_\_\_\_\_

(Print): \_\_\_\_\_

Date \_\_\_\_\_

Verified  Signed Certificate \_\_\_\_\_