



CHECKLIST

ADVANCED COUNTY CERTIFICATION

Name: _____

Title: _____

Agency: _____

Email Address: _____

Last Four of SS: XXX-XX-_____ FEMA SID# _____

Applicant Position: Appointed Coordinator Deputy Coordinator Staff

Course	Date Completed	Certificate Enclosed
1. Program Review (for appointed coordinator only)		
2. IS - 120.a An Introduction to Exercises		
3. IS - 393 Introduction to Mitigation		
4. IS - 547.a Introduction to Continuity of Operations		
5. IS - 775 EOC Management and Operations		
6. L - 146 or G - 146 or L - 147 Homeland Security Exercise Evaluation Program (HSEEP)		
7. G - 235 Emergency Planning		
8. G - 271 Hazardous Weather and Flooding Preparedness		
9. G - 290 Basic Public Information Officer		
10. ICS 300 Intermediate ICS for Expanding Incidents		

County Agency Recommendation

Signature: _____
 Name, Title _____
 (Print): _____
 Agency: _____
 Date: _____

PEMA Area Office Recommendation

Signature: _____
 Name, Title _____
 (Print): _____
 Area Office: _____
 Date: _____

PEMA State Training Officer

Approved Signature: _____
 Denied Name (Print): _____
 Date: _____