



CHECKLIST

ATTACHMENT B

COUNTY ADVANCED CERTIFICATION

Name: _____

Title: _____

Agency: _____

Email Address: _____

FEMA SID# _____

Applicant Position: Appointed Coordinator Deputy Coordinator Staff

Course	Date Completed	Certificate Enclosed
1. IS - 130 Exercise Evaluation and Improvement Planning		
2. IS - 393 Introduction to Mitigation or G - 318 Local Hazard Mitigation Planning		
3. IS - 547 Introduction to Continuity of Operations		
4. IS - 775 EOC Management and Operations		
5. K/L - 146 Homeland Security Exercise Evaluation Program (HSEEP)		
6. G - 235 Emergency Planning		
7. G - 271 Hazardous Weather and Flooding Preparedness		
8. G - 289 Public Information Officer Awareness		
9. ICS - 300 or G - 300 Intermediate ICS for Expanding Incidents		
10. Service at the basic certification level for one year.		
11. Coordinators and deputy coordinators must attend one In-Service training sessions provided by your Area Office and one emergency management related conference. Staff must attend two of the four county quarterly trainings.		
12. Successful program review by the requisite PEMA Area Office		

County Agency Recommendation

Signature: _____

Name, Title _____

(Print): _____

Agency: _____

Date: _____

PEMA Area Office Recommendation

Signature: _____

Name, Title _____

(Print): _____

Area Office: _____

Date: _____

PEMA State Training Officer

Verified

Signature: _____

Name (Print): _____

Date: _____

Signed Certificate: _____