



Training Announcement BASIC ISUITE

**Monday, March 8 thru Thursday, March 11, 2010
(Friday, March 12 Optional 0800-1200)***

**Spokane County Fire District 9, Station 92
3801 East Farwell Rd, Mead Wa**

Lead Instructor: Brenda Johnson - (503) 808-6319

Course Coordinator: Diana Hernandez - (360) 902-1310

Nominations Due: Friday, February 12, 2010

Selection Confirmations: will be sent out by February 19, 2010

COURSE DESCRIPTION: This is the full course covering the basics of all ISuite Modules, including Database and Data Administration Modules. Emphasis will be put on the Resources, IAP, Demob, Time, and Cost modules.

TARGET GROUP: Individuals new to ISuite or those with minimal experience who want to assist with incident support.

TRAINEE PREREQUISITES: Students should have basic computer skills and knowledge of the Basic Incident Command System (for your information, the ICS I-100 course is available on-line at http://training.nwcg.gov/courses/i100/ICS_I100_online/ICS_I100_online.html or you can contact me, Diana, for a CD-ROM version). S-260 and S-261 are recommended but not required.

OBJECTIVES: To provide students with hands-on experience navigating the ISuite program and to demonstrate how the different modules work together.

*The course is scheduled to run from 1300 on Monday thru 1700 on Thursday. Friday morning will be reserved for those students wanting additional assistance.

Please complete the attached NWCG Nomination Form and Email/Fax to Diana Hernandez at diana.hernandez@dnr.wa.gov or (360) 902-1757 (fax).

(12/21/2009)

Atch: NWCG Interagency Training Nomination Form

**NWCG INTERAGENCY TRAINING NOMINATION
AND
AGREEMENT TO COLLECT FUNDS**

INSTRUCTIONS: Complete Part I. Complete PART II only if there are charges for the training.

Part I TRAINING NOMINATION

Course Number ISUITE	Course Name BASIC ISUITE MODULES	PRIORITY ____ of ____
Course Date(s) Mar 8-11, 2010 Mar 12 optional	Course Location Spokane County Fire District 9, Station 92 3801 East Farwell Rd, Mead Wa	Course Tuition (if required)
Course Coordinator Name (First Last) Diana Hernandez		Coordinator Phone (Voice/Fax) 360-902-1310/360-902-1757
Coordinator E-Mail Diana.hernandez@dnr.wa.gov		
Nominee's Name (First MI Last)		Date Submitted
Working Job Title		E-Mail
Agency Name		Fax
Home Unit	Nominee's Mailing Address (if different)	
Street	Street	
City	State	City State
Zip	Telephone	Zip Telephone
List training completed and dates pertinent to this course: Please check: S-260 Had ____ Not had ____ S-261 Had ____ Not had ____		
List your past qualifications pertinent to this course: Please check: Have you ever used ISUITE? Yes ____ No ____		
Nominee's Signature: (I will notify the Unit Training Representative if I am unable to attend.)		
Supervisor's Signature (I certify the nominee meets the prerequisites, or if not met I will put the reasons for attending the course in Remarks.)		
Remarks:		