

EASTERN WASHINGTON INTERAGENCY TRAINING ZONE



Training Announcement Training Announcement S230/231 Single Resource/Engine Boss

S230 is designed to meet the training needs of a crew boss on an incident. Units include preparation, mobilization, tactics & safety, off line duties, demobilization and post incident responsibilities.

S231 provides single resource boss training relevant to the engine boss position. Units covered include: identifying crew and engine capabilities; gathering information for assignments; communicating and coordinating effectively with crewmembers; tactics and safety.

DATES OF CLASS:

S230 Single Resource Boss- Feb 6,7 (0800-1730 hrs)
Feb 13 (1500-2200 hrs)

S231 Engine Boss- Feb 14th (0800-1800hrs)

LOCATION: Thorp – Kittitas County Fire District #1
10700 Thorp HWY N
Thorp, 98946

PREREQUISITES:

S230- Qualified as FFT1, S290 Intermediate Wildland Fire Behavior

S231- Qualified as FFT1, S230 Single Resource Boss

NOMINATIONS:

Please return NWCG nomination form with registration by January 15th.

DEADLINE FOR REGISTRATION: February 1, 2008

MAIL, FAX, or EMAIL REGISTRATIONS TO:

Mail, e-mail or FAX registrations to

Wenatchee Valley College, Bruce Merighi, COURSE COORDINATOR

1300 5th St.

Wenatchee, WA 98801

BMerighi@wvc.edu

And

Brock Shero, lead instructor, 360-985-7511

jeep@tds.net

Cost \$ 265 payable to Wenatchee Valley college, based on minimum class size needed to pay for instructors and materials. Fees may be reduced based on class enrollment. Class fees are waived for Fire Districts who have suppression agreements with Department of Interior.

Meals On your own.



EASTERN WASHINGTON INTERAGENCY TRAINING ZONE

*Next Form For
Federal Agencies*

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 S-230/231		Course Name Single Resource/ Engine Boss			PRIORITY ____ of ____		
IQCS Session Number		Course Location Kittitas County Fire District #1 10700 Thorp HWY N Thorp, 98946			Course Date(s) Feb 6,7 13,14		
Course Tuition (if required) \$265		Course Coordinator Name (First Last) Bruce Merighi			Course Coordinator Phone Number 509-682-6659		
Course Coordinator E-Mail BMerighi@wvc.edu		Course Coordinator FAX Number			Date Submitted		
Employee's IQCS ID Number:							
Nominee's Name (First MI Last)							
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:							
List your past qualifications pertinent to this course:							
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:							

Course Name: **S-290 Intermediate Wildland Fire Behavior** Nominee Name: _____

PART II AGREEMENT TO COLLECT FUNDS (Complete only if there is a tuition charge)

Please check the section appropriate to the legal authority to collect monies and complete the address/signature block. This form must be signed by an individual with authority to sign agreements and obligate the funds listed. Note: Tribal governments are not covered by the Intergovernmental Cooperation Act of 1968.

_____ **NON-FEDERAL AGENCIES:** Contractor, states, local governments engaged in fire suppression and protection of public lands. This training, payment, and collection is duly authorized under the Intergovernmental Cooperation Act of 1968 as amended by the act of September 13, 1982 (P.L 97-258), Section 6505. The NWCG Interagency Training Nomination constitutes written request and it is understood the bill for the training will consist of tuition plus all other identifiable costs as provided by law. Authorizing signature is also certifying services requested cannot be procured reasonably and expeditiously through ordinary business channels and funds are available. Provider's signature certifies the agency is offering similar services for its own use.

COMPLETE CHARGE CODE: (Include required fiscal references) _____

Agreement Number: _____

_____ **OTHER FEDERAL AGENCIES:** This training, payment, and collection is duly authorized under Section 601 of the Economy Act of June 30, 1932 (31 USC 1535) as amended. The NWCG Interagency Training Nomination constitutes the required written request and it is understood the bill for the training will consist of tuition plus all other identifiable costs as provided by law. Authorizing signatures is also certifying services requested are in the best interest of the United States; cannot be procured by contract as conveniently or cheaply from a commercial source and appropriate funds are available for this purpose. Provider's signature certifies the agency is offering similar services for its own use.

COMPLETE CHARGE CODE: (Include agency location) _____

Agreement Number: _____

_____ **SAME AGENCY AS PROVIDER:** The NWCG Interagency Training Nomination constitutes agreement to pay charges as outlined in nomination materials. Authorizing signature certifies funds are available for this purpose.

COMPLETE CHARGE CODE: (Including Override) _____

Agreement Number: _____

ADDRESS/SIGNATURE:

Billing address if different than Sponsor or Agency Address:

AUTHORIZED TO EXPEND FUNDS LISTED ABOVE:

AGREES TO PROVIDE TRAINING REQUESTED:

Signature

Date

Signature

Date

Title

Title