



MABAS DIVISIONS 4 & 5 SRT

End of Year Training Form - Sonar Team

I, the above named SRT Sonar Team Member, certify that I have read and agree to follow the standards and guidelines set forth in the current SRT Sonar Team SOG (Standard Operating Guidelines), dated July 19, 2021.

SRT Sonar Team Member Signature: _____

I, the above named SRT Sonar Team Member's Fire Chief, certify that (1) this individual has my permission to participate in all activities related to their SRT Sonar Team membership and (2) that he/she is physically able to perform the duties required to be a member of the SRT Sonar Team.

Fire Chief Signature: _____

- To request a training exception for this year, please check this box and attach to this form a letter/memo from your Fire Chief. The letter/memo should be addressed to the SRT Administrative Coordinator and outline the reasons and/or extenuating circumstances that your Fire Chief feels should be taken into consideration when reviewing your request. Training exceptions will be considered by the MABAS Operations Chiefs on a case by case basis.

ADMINISTRATION USE ONLY

Received:	Date: _____	By: _____		
Team Leader Approval:	Date: _____	By: _____	<input type="checkbox"/> App	<input type="checkbox"/> N/App
Ops Chief Approval:	Date: _____	By: _____	<input type="checkbox"/> App	<input type="checkbox"/> N/App
Processed:	Date: _____	By: _____		