



MABAS DIVISIONS 4 & 5 SRT

New Member Application Form - Wildland Task Force

To apply to join the SRT Wildland Task Force, please complete this form in its entirety and submit it to the SRT Administrative Coordinator. Application forms can be emailed to admin@srtillinois.org, faxed to (866) 560-5538 or mailed to 20 W. North Street, Hainesville, IL 60030. APPLICATION FORMS MUST BE TYPED.

Name: _____ Date: _____

Department/District: _____

Dept/Dist Address: _____

City: _____ State: _____ Zip Code: _____

Dept/Dist Phone: _____ Dept/Dist Fax: _____

Cell Phone: _____ Cell Phone Carrier: _____

Email Address: _____

MEMBERSHIP REQUIREMENTS

Individuals who wish to join the SRT Wildland Task Force must be trained in wildland firefighting to the basic level, according to the requirements of the National Wildfire Coordinating Group (NWCG). Minimum certification requirements include:

1. S-130 Basic Firefighter
2. S-190 Introduction to Wildland Fire Behavior
3. L-180 Human Factors
4. IS-100 Introduction to the Incident Command System, Module 1
5. State of Illinois Firefighter II/Basic Operations Firefighter

Individuals must also successfully complete and pass the Pack Test with an approved proctor. For more information regarding the Pack Test and approved training sites and proctors, contact one of the SRT Wildland Task Force Leaders. Please provide us with the following requested information regarding your relevant classes/certifications, and attach copies of the certifications to this form:

<u>COURSE</u>	<u>COMPLETION DATE</u>	<u>COURSE</u>	<u>COMPLETION DATE</u>
S-130 Basic Firefighter*	_____	S-131 Adv. FF/Squad Boss	_____
S-190 Intro. to Wildland*	_____	S-215 Fire Ops in Wild/Urban	_____
L-180 Human Factors*	_____	S-230 Crew Boss - Single Res.	_____
IS-100 Intro to ICS*	_____	S-231 Engine Boss - Single Res.	_____
Illinois FF II/Basic Ops FF*	_____	S-290 Inter. Wild. Fire Behav.	_____

Pack Test Date (Passed):* _____

** Required to join task force.*

Special Skills/Other Courses: _____



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Name: _____

Date: _____

AUTHORIZATION & ANNUAL TRAINING REQUIREMENTS

The above named individual has been authorized by his/her fire department/district to join the MABAS Divisions 4 & 5 SRT Wildland Task Force. The individual acknowledges and understands that he/she is responsible for following the Standard Operating Guidelines of the SRT Wildland Task Force, which are available on the SRT website.

The individual and the fire department/district understand that it is their collective responsibility to maintain all required certifications, training records and medical/fit for duty records pertaining to the individual's membership with the SRT Wildland Task Force. The individual and fire department/district also acknowledge that all SRT Wildland Task Force members must complete the following each year to remain on the team's roster:

1. Attend/complete 12 hours of wildland training as follows:
 - a. Attend at least one SRT Wildland Task Force team meeting/update (max. two hours per meeting).
 - b. Attend at least one SRT Wildland Task Force field exercise/prescribed burn or response/incident. Field exercises/prescribed burns must be listed on the SRT training calendar or organized by a task force leader. Training credit for a response/incident will be a maximum of four hours per response/incident.
 - c. Complete and pass the Pack Test with an approved proctor (one hour of training credit will be given).
 - d. Additional training hours (to reach required 12 hours) may be earned for (1) attending field exercises/prescribed burns organized by IDNR or an individual department/district, (2) participating in a formal statewide or federal agency wildland deployment (max. 20 hours per year), (3) attending SRT Wildland Task Force classroom training, (4) completing on-line wildland training (max. three hours per year) and (5) participating in a public education event (max. one per year/max. two hours per event). In all instances, credit will only be given with the prior approval of one of the task force leaders.

Applicant Signature: _____

Fire Chief Signature: _____

ADMINISTRATION USE ONLY

Received: Date: _____ By: _____

Team Leader Approval: Date: _____ By: _____ App N/App

Ops Chief Approval: Date: _____ By: _____ App N/App

Processed: Date: _____ By: _____