JACKSON COUNTY ARES APPLICATION

DATE: _____

LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PRIMARY CONTACT NUMBER: _____ CELL_____ HOME_____ WORK_____

HOME TELEPHONE: _____ WORK NUMBER: _____ OK TO CALL: YES____ NO____

Cell Number:_____ Cell Provider:_____ Okay to receive texts: Y   N

ALTERNATE NUMBER: _____ PRIMARY EMAIL: _____

DATE OF BIRTH: _____ MEDICAL RESTRICTIONS: _____

CALL Sign:_____ CLASS:_____ EXP DATE:_____YEAR FIRST LICENSED:_____
Driver's License Number:_____ State of Issue_____ EXP DATE:_____

TRAINING INFORMATION: YEAR OF LAST WEATHER SPOTTING TRAINING: _____

ARRL EMCOMM:

I DATE:_____CERT ONHAND: _____   EMCOM 001: DATE:_____CERT OH: _____

II DATE:_____CERT ONHAND: _____

III DATE:_____CERT ONHAND:_____EMCOM 016: DATE:_____CERT OH: _____

FEMA TRAINING:

IS-100 DATE:_____CERT ONHAND:_____IS-200 DATE:_____CERT ONHAND: _____

IS-700 DATE:_____CERT ONHAND:_____IS-704 DATE:_____CERT ONHAND: _____

IS-800 DATE:_____CERT ONHAND:_____IS-802 DATE:_____CERT ONHAND: _____

OTHER TRAINING: (Such as Red Cross CPR, first aid etc.)

_____DATE:_____CERT ONHAND: _____

_____DATE:_____CERT ONHAND: _____

NET CONTROL EXPERIENCE:

NO:_____YES;_____ if yes describe: _____

WHEN COMPLETED PLEASE MAIL TO 704 W 90TH ST, KCMO 64114 OR EMAIL FILE TO w0krf@att.net

CW EXPERIENCE/PROFICIENCY: NO:_____YES;_____if yes wpm: _____

INTERESTS: WEATHER:_____DISASTER:_____RACES:_____OTHER: _____

TIMES AVAILABLE:

DAYS:_____NIGHTS:_____WEEKENDS: _____

EQUIPMENT CAPABILTIES: (Check box with X or Yes)

MODE	HF	6 METERS	2 METERS	222 MHZ	440 MHZ	OTHER
BASE						
CW						
FM						
DIGITAL						
MOBILE						
CW						
FM						
DIGITAL						
GO KIT HT: _____ MOBILE:_____						
CW						
FM						
DIGITAL						

OTHER MODES:

FRS:_____GMRS:_____GPS:_____CB: _____

EMERGENCY POWER: (SOLAR, BATTERY, GENERATOR)

HF:_____NUMBER OF HOURS OPERATION:_____TYPE OF ALTERNATE POWER: _____

V/UHF:_____NUMBER OF HOURS OPERATION:_____TYPE OF ALT POWER: _____

_____   _____

SIGNATURE   DATE

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WHEN COMPLETED PLEASE MAIL TO 704 W 90TH ST, KCMO 64114 OR EMAIL FILE TO w0krf@att.net

Jackson County Amateur Radio Emergency Services

15 January 2016

Jackson County ARES (JCARES) Credentialing Program

During a large scale event the need for additional communications resources can quickly overwhelm the locally available operators. The logical resolution is to request support from the un-impacted areas nearby. The result is an Emergency Management staff working with operators who they don't know and thus aren't confident in their skill set. The reason for this is we do not have a method for demonstrating our skills and relating them to their value during a response. This problem is not unique to radio communications but true of almost all disciplines

Emergency management and incident response activities require that resources (personnel, teams, facilities, equipment, and/or supplies) are prepared to meet incident needs. Utilization of standardized resource management concepts such as typing, credentialing, training, and exercising facilitates the efficient and effective deployment of resources.

It is essential for preparedness organizations to inventory and maintain current data on their available resources. The inventory process involves:

> • **Resource Typing:** Assigning a standardized typing designation to each resource that allows Incident Commanders to request and deploy resources.

> • **Credentialing, Training, and Exercising:** Ensuring personnel are qualified, trained, and exercised to common standards that provide a foundation for the interoperability and compatibility of resources.

Currently Federal Emergency Management Agency (FEMA) has not applied Resource Typing to Amateur Radio as it has for public safety resources. To be proactive in this process and provide local Emergency Managers (EM) some idea of what our skills sets are, a panel of amateur radio leadership in the KC Metro area developed a set of personnel typing requirements for amateur radio operators that follow the National Incident Management System (NIMS) Resource Typing format.

Below are the proposed training and skill set requirements for each of the four operator types. This is should be considered a MINIMUM set of requirements for each classification. The main objective is to make it easy for the receiving EM office to have some sense of what a particular operator's skills are and to provide confidence that a particular operator would be comfortable and able to complete a task or challenge that might be assigned to them.

Radio Operator IV (Basic entry level)

> • Technician Class License (or higher)

> • IS-100.b - Introduction to Incident Command System, ICS-100

> • IS-700 National Incident Management System (NIMS), An Introduction

> • Government Issued Photo ID (Drivers License, Student ID, etc).

Radio Operator III

- All of Radio Operator IV plus the following:

- IS-200.b - ICS for Single Resources and Initial Action Incidents

- IS-704 NIMS Communications and Information Management or IS-802 Emergency Support Functions: Communications

- IS-800.B National Response Framework, An Introduction

- Demonstrated ability to act as net control.

- Emcomm Group issued ID (ARES, RACES, etc.)

Radio Operator II

- All of Radio Operator III plus the following:

- General Class License (or higher)

- Proficiency in one mode other than voice (i.e. digital, Morse code, RTTY, ATV, etc.)

- Introduction to Emergency Communication – Amateur Radio Relay League (ARRL) Course #: EC-001

- Background check in home jurisdiction, if required

- Have a jurisdictionally (City, County, Region or State) issued Communications ID

Radio Operator I

- All of Radio Operator II plus the following:

- Hold a leadership role in an Emergency Communications (EMCOMM) group. This can be a board position like President, or appointment like Field Day Coordinator, Training Officer, etc.

- Have a demonstrated ability to lead and direct radio operators, demonstrated by either coordinating public service events, or creation & execution of live radio training or exercises with groups of 10-15 or more.

- Public Service and Emergency Communications Management for Radio Amateurs-ARRL Course #: EC-016

In order to provide qualified resources to area emergency management the members of Metropolitan Emergency Communications Council (MECC) have adopted the Resource Typing details as described above. To meet these needs, JCARES will begin a Resource Typing/Credentialing program. This program will be implemented over the next 1 to 2 years to allow for individuals to prepare with appropriate training and experience to reach the level they desire to be classified.

The initial requirements for our members are to provide to the Credentialing Committee the following information:

- Copies of completion certificates for each FEMA course they have taken.
- Provide an updated membership form with current information
- Provide a picture meeting the badge system requirements, or have picture taken at JCARES meeting.

Since members may not have available all of the certificates of courses taken, the attached transcript request is provided for your convenience. Please complete the header information, sign and date. You may fax the request to the number listed or mail to the address provided. If possible, please fax the request since the response is quicker. There is no charge or cost to you for the transcript. A copy will be sent to JCARES Credentialing Committee and to each member.

Due to the time required to complete the credentialing process all new badges issued in 2016 will be resource typed as Radio Operator IV.

Since the ARRL course work has recently been revised the following FEMA Emergency Management Institute (EMI) Professional Development Series (PDS) courses may be substituted for the ARRL course as listed.

Sub for EC-001

- IS-1 Emergency Manager, An Orientation to the Position
- IS-120.a An Introduction to Exercises
- IS-130 Exercise Evaluation and Improvement Planning
- IS-288 The Role of Voluntary Agencies in Emergency Management

Sub for EC-016

- IS-240.a Leadership & Influence
- IS-241.a Decision Making & Problem Solving
- IS-250 Emergency Support Function 15 (ESF-15) External Affairs
- IS-244.a Developing and Managing Volunteers
- IS-139 Exercise Design

The credentialing committee is aware of some particular issues relating to the following requirements:

Radio Operator II

• Background check in home jurisdiction, if required: <u>Currently JCARES will only require background checks if required by the jurisdiction issuing the ID.</u>

• Have a jurisdictionally (City, County, Region or State) issued Communications ID: <u>JCARES is working with jurisdictions in Jackson County to resolve the ID requirement.</u>

Radio Operator I

• Have a demonstrated ability to lead and direct radio operators, demonstrated by either coordinating public service events, or creation & execution of live radio training or exercises with groups of 10-15 or more.

<u>Leadership capabilities outside of Amateur Radio will be considered on an individual basis.</u>

JCARES will require an annual update of the membership and training records prior to issuing your JCARES ID Card. The process for which has not been determined at this point. This program will be implemented after the member training session to be scheduled.

Attachments:
 EMI IS Transcript Request Form
 JCARES Membership Form

Instructions for completing the EMI ISP Transcript request:

1. Complete the information using the fillable form on following page.
2. Print a copy of the completed form.
3. Sign form.
4. Mail or fax as per instructions below.

OR

1. Print blank form from following page.
2. Complete information in pen.
3. Sign form
4. Mail or fax as per instructions below.

Mail your request to:

National Emergency Training Center
EMI Independent Study Program
16825 South Seton Avenue
Emmitsburg, MD 21727-8998

OR FAX TO: (301) 447-1201

EMI Independent Study Program

Transcript Request Form

A transcript of your Independent Study course completions will be sent to you (the student), and to any Institutions you indicate below. Please type or write your information legibly. Please allow 10 business days for delivery via U.S. Mail.

If you are requesting transcripts for a large number of students, please contact our office at 301-447-1200 or Independent.Study@fema.dhs.gov for additional completion verification options.

Student Name **(required):**
Address **(required):**
City, State & Zip Code **(required):**
Phone Number:
Email Address:
Social Security Number **(required):**   Please see our website at http://training.fema.gov/EMIWeb/IS/Exams/privacystatement.asp *for information on why the ssn is required.*
Student Signature (required):
Only you (the student) can authorize the release of your training record(s).

Institutions to receive Official Transcripts(s):

*As the requestor, you automatically receive a student copy of your transcript

Institution Name: Jackson County ARES
Attention to **(required):** Richard Fretwell
Address: 704 W 90th St.
City, State & Zip Code Kansas City MO 64114
Institution Name:
Attention to **(required):**
Address:
City, State & Zip Code

Mail your request to:

National Emergency Training Center
EMI Independent Study Program   OR   **Fax to**: (301) 447-1201
16825 South Seton Avenue
Emmitsburg, MD 21727-8998