

Safety Officer Type 1 Qualified (SOF1 Qualified)

Name: _____ Home Agency: _____

Requesting review by the Qualification Committee on: _____
(DATE)

SUBMIT THE FOLLOWING DOCUMENTATION:

Training Certificates:

- S-520 Advanced Incident Management
OR
 CIMC Complex Incident Management Course

Fire Experience: Minimum of 10 Operational Periods as an SOF1(t). At least 7 of those OP must occur on an extended attack Wildfire Incident. The remaining 3 OP could occur on IA, Rx, STEX, All-Hazards, Staging/Prepo, or Interview Assessment for Rare Tasks.

- Fire Experience Logs through the end of last year
 Fire Experience Logs that document 10 or more Operational Periods as SOF1(t)
 ICS-225 (Personnel Performance Rating) for each trainee assignment.
• Trainee assignments after 7/24/19 will not be accepted by the committee w/out an ICS-225

Position Task Book: Completion and Certification of the SOF1 Task Book

- SOF1 Cover Sheet
 Final Evaluator/Agency Certification Page (both signatures required)
 Minimum of 3 task book evaluations (submit all evaluations if more than 3)
 Task book evaluations are signed by at least 2 different evaluators

(10 OP, 3 Incidents, 2 Different Evaluators)

- Upload the required documents in IQS or send by email to: AzRedCards@dffm.az.gov

Send an email to AzRedCards@dffm.az.gov to have your name added to the agenda for the State Committee Meeting. The deadline is posted in the Local News section on the IQSweb login page. Attach your documents in IQS or email them with your request.