

ICS-300 Intermediate ICS: ICS for Supervisors and Expanding Incidents

Instructor: Rick Lehmann
Location: Doty VFD
8770 Nemo Road
Rapid City, SD 57702
Dates: March 6-7, 27, 2010
Time: 0800-1700 (one night may go late to accommodate all activities)
Course
Coordinator: Tammy Stadel
TStadel7@gmail.com
(605) 484-7279

Course Description

This course provides description and detail of the Incident Command System (ICS) organization and operations in supervisory roles on expanding or Type 3 incidents. Topics include: ICS fundamentals review, incident/event assessment and agency guidance in establishing incident objectives, Unified Command, incident resource management, planning process, demobilization, transfer of command, and close out. This course was developed in conjunction with the US Fire Administration (H465) and the Emergency Management Institute (G300). These courses are built on the same lesson objectives and content as the NWCG I-300 course and are interchangeable; they are all National Incident Management System (NIMS) compliant.

Objectives

- Describe how the National Incident Management System (NIMS) Command and Management component supports the management of expanding incidents.
- Describe the incident/event management process for supervisors and expanding incidents as prescribed by the Incident Command System (ICS).
- Implement the incident management process on a simulated Type 3 incident.
- Develop an Incident Action Plan (IAP) for a simulated incident.

Course Prerequisites

I-200, Basic: ICS for Single Resources and Initial Action Incidents

Nomination Deadline

All nomination forms must be received by February 20, 2010. Please provide an e-mail address for confirmation. If no e-mail address is available, class information will be mailed to the address in the "Nominee's Mailing Address" block in the NWCG form. Please email nomination forms to the address above.

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 Name: ICS-300 Intermediate ICS: ICS for Supervisors and Expanding Incidents		PRIORITY _____ of _____
Course Date(s) March 6, 7, 27, 2010	Course Location Doty VFD	Course Tuition (if required) \$0.00
Course Coordinator: Tammy Stadel	Coordinator Phone: (Voice) (605) 484-7279	Coord. E-Mail: TStadel7@gmail.com
Nominee's Name & IQS or ICQS Number		Date Submitted
Working Job Title	E-mail Address	
	Fax Number:	
Agency (Name, Address)	Nominee's Mailing Address (if different)	
Telephone No.	Telephone No.	
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:		