COMPETENCY CHECKLIST
INCIDENT TERMINATION

Technician: _____ Date: _____/_____/_____

AREA 5.1 INCIDENT TERMINATION – TERMINATION AND DOCUMENTATION			
No.	**Requirement**		
5.1.1	Given various simulated or actual incidents, participate in an on-scene incident debriefing and incident critique.	_____ (Signature)	__/__/__ (Date)
5.1.2	During participation in the debriefing and critique, provide information concerning operational observations and activities taken at the incident.	_____ (Signature)	__/__/__ (Date)
5.1.3	Demonstrate the ability to properly complete incident documentation reports as required by the employer's emergency response plan and operational procedures.	_____ (Signature)	__/__/__ (Date)
5.1.4	Demonstrate the ability to properly complete post incident exposure documentation as required by the employer's emergency response plan.	_____ (Signature)	__/__/__ (Date)
5.1.5	Demonstrate the ability to properly document equipment and PPE use in accordance with manufacturer recommendations and the employer's emergency response plan.	_____ (Signature)	__/__/__ (Date)
Evaluator Remarks			
		_____ (Signature)	__/__/__ (Date)

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