**Personal Information**

Full Name:

FEMA Student ID# (SID):

Contact Number:

Email Address:

Mailing Address:

Primary Affiliated IMT:

**Desired Certification** (Select all that Apply):

Note: All are All-Hazards Type 3 Positions

☐ Incident Commander (ICT)

☐ Safety Officer (SOF)

☐ Public Information Officer (PIO)

☐ Liaison Officer (LOFR)

☐ Operations Section Chief (OSC)

☐ Division/Group Supervisor (DIVS)

☐ Task Force Leader (TFLD)

☐ Staging Area Manager (STAM)

☐ Planning Section Chief (PSC)

☐ Resource Unit Leader (RESL)

☐ Situation Unit Leader (SITL)

☐ Demobilization Unit Leader (DMOB)

☐ Documentation Unit Leader (DOCL)

☐ Logistics Section Chief (LSC)

☐ Communications Unit Leader (COML)

☐ Medical Unit Leader (MUL)

☐ Food Unit Leader (FDUL)

☐ Supply Unit Leader (SPUL)

☐ Facilities Unit Leader (FACL)

☐ Ground Support Unit Leader (GSUL)

☐ Finance/Administration Section Chief (FSC)

☐ Compensation/Claims Unit Leader (COMP)

☐ Procurement Unit Leader (PROC)

☐ Time Unit Leader (TIME)

☐ Cost Unit Leader (COST)

☐ Other

**Physical/Medical Fitness:**

☐ Meets Requirements set by my Authority having jurisdiction

☐ Do Not Meet Requirements set by my Authority having Jurisdiction

**Supporting Documentation**

☐ Letter of Recommendation

☐ ICS Resumé / CV

☐ Training Certificates

☐ NIMS/ICS Basic Training

☐ AHIMT Course (if applicable)

☐ EOC/IMT Interface (if applicable)

☐ AHIMTA Higher Standard Training

☐ Leadership Training

☐ Hazardous Materials Training

☐ Position Task Book

☐ Qualifying Event #1 ICS 225

☐ Qualifying Event #2 ICS 225

☐ Qualifying Event #3 ICS 225

☐ Qualifying Event #4 ICS 225 (If Applicable)

☐ Qualifying Event #5 ICS 225 (If Applicable)

☐ Proof of qualification in another system

☐ Other Supporting Documentation

☐ Paid in full receipt

**Declaration**

I hereby declare that the information provided is accurate and complete to the best of my knowledge.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Submission Instructions**

Ensure all required documentation is included.

Submit the completed form to the Certification Committee (CC) via [Certifications@AHIMTA.org](mailto:Certifications@AHIMTA.org).

Await confirmation and further instructions from AHIMTA.