INCIDENT PERSONNEL PERFORMANCE RATING		INSTRUCTIONS: The immediate job supervisor will prepare this form for each subordinate. It will be delivered to the planning section before the rater leaves the fire. Rating will be reviewed with employee who will sign at the bottom.													re.				
THIS RATING TO BE USED ONLY FOR DETERMINING AN INDIVIDUAL'S PERFORMANCE																			
1. Name Sam Turner						2. Fire Name and Number Lockheed (CA=CZU=007246)													
 Home Unit (address) Monterey Fire Department, 6318 Pacific St. 								Fire n, C		ldres	ss)								
5. Fire Position STEN (t)	6. Date From:	7. Acres Burne 0:08/16/11 4000								rned	ed 8. Fuel Type(s) 6, 10								
9. Evaluation													1						
Enter X under appropriate rating number and under proper heading for each category listed. Definition for each rating number follows:															9				
0 - Deficient. Does not meet minimum requirements of the individual statement. DEFICIENCIES MUST BE IDENTIFIED IN REMARKS.																			
 Needs to improve. Meets some or most of the requirements of the individual element. IDENTIFY IMPROVEMENT NEEDED IN REMARKS. 																			
2 - Satisfactory. Employee meets all requirements of the individual element.																			
3 - Superior. Employee consistently exceeds the performa						ance requirements.													
Rating Factors				Hot	-	-		Мор					mp	_			Spec	:ify)	
			0	1	2	3	0	1	2	3	0	1	2	3	0	1	2	3	
Knowledge of the job					\checkmark				\checkmark					\checkmark					
Ability to obtain performance					\checkmark				\checkmark				1						
Attitude						1			1				\checkmark						
Decisions under stress					-	1	-		1				1						
Initiative					1					1				1					
Consideration for personnel welfare			1			1				V				1					
Obtain necessary equipment and supplies					\checkmark				1				\checkmark	-	-				
Physical ability for the job			1		1			-	1		-		1						
Safety			1		-	\checkmark			-	1	-		V			-		-	
Other (specify)			-	-			-				-							-	
10. Remarks				-		-	-	_	-	-	-	-	-		-	-			
Sam did an outstanding job as preparation, putting together a the fire thus far). He has a god briefings were pertinent to the neighboring strike teams durin Sam is ready to be qualified as	i packet (od comn condition ig firing c s a strike	of information (nand presence a ns and covered operations was team leader.	weat and all o exce	her f work if the llent	ored ed v imp and	casts vell v porta	s, ma with int ir	aps, strik nforn	and e te natio	info am on. 3	rma pers Sam	tion onne 's co	abo el. l oord the	ut th lis s inati ope	e his afet on w ratio	y vith	y of		
11. Employee (signature) This rating has been discussed v (signature) 13. Rate By (signature) 14. Home Unit (address)					15. Position of Fire								12. Date 8/16/11						
13. Rate By (signature) (signature)		6318 Pacific St. Montera STEN							on of Fire 16. Date 8/16/11										
		Form ca	an be	e loc	atec	1 at:													

https://www.nwcg.gov/publications/ics-forms