



State of Alaska (SOA)

Draft

Type 3 All-Hazards Grandfathering Application

Personnel already trained in the National Incident Management System (NIMS), Incident Command System (ICS) curriculum model are eligible to apply for the grandfathering option for the State of Alaska, Type 3 All-Hazards Certification. Complete this application and submit documentation showing how this individual meets the requirements of the Type 3 All-Hazards position.

Name: _____ NIMS ICS Title: _____

Home Unit/Agency: _____

Home Unit Address: _____

Home Unit Phone Number: (_____) _____

I certify this individual has successfully performed and demonstrated all the competencies, behaviors, and tasks listed in the "Type 3 All-Hazards Position Task Book Assessment and Guide" for this position.

I further certify:

- 1. This individual's emergency management experience includes a minimum of three (3) events.
2. The three (3) emergency management events have occurred within a five (5) year period.
3. All qualifying events have been completed within a five (5) year period with no more than three (3) years between each event.

Official's Name: _____ Official's Title: _____

Official's Signature: _____ Date: _____

To be completed by Alaska Intrastate Mutual Aid System (AIMAS) Qualifications Subcommittee

- I approve this individual to receive a Type 3 All-Hazards certification for the above listed position endorsed by the AIMAS Qualifications Subcommittee.
I disapprove this individual to receive a Type 3 All-Hazards certification for the above listed position. Reason: _____

AIMAS Chair Signature: _____ Date: _____

- A copy of this signed form and the certification, if applicable, will be issued to the individual.
This original signed copy and a copy of the certification, if applicable, will be filed at the Division of Homeland Security and Emergency Management (DHS&EM).