

Tri State Mutual Aid Association All-Hazards Incident Management Teams



With the expanding natural or manmade incidents within the region which can overwhelm a jurisdiction's capabilities The Tri-State Mutual Aid Association (TSMA) is developing a regional "All-Hazards" Incident Management Team (AHIMT).

All-Hazards Incident Management Teams are groups of ICS trained personnel who respond to assist local responders in managing an incident or event. Members are trained to assist and meet the needs of our members in and expanding incident management needs. AHIMTs provide a response resource for affected jurisdictions to draw on to assist their staff with management and coordination of incident management functions.

TSMA is seeking motivated and experienced personnel from our region to serve in various Command and General Staff and supporting positions during more complex incidents and events that occur in our region.

Applicants must have successfully completed the following FEMA Incident Command System courses prior to applying for a position on the Incident Management Team:

- ICS100-Introduction to Incident Command System
- ICS200-ICS for Single Resources and Initial Action Incidents
- ICS300-Intermediate ICS for Expanding Incidents
- ICS700- Introduction to the National Incident Management System (NIMS)
- ICS800-Introduction to the National Response Framework
- ICS400- Advanced Incident Command System (Required for Command and General Staff positions)

The following courses are recommended:

- USFA O-0305, Type-3 Incident Management Team Introduction, or
- NFA 0337, Command and General Staff Functions for Local Incident Management Teams
- Position specific courses are made available through TEMA. A calendar of courses is available online at TEMA Training and team members will be notified of training opportunities.

To apply for a specific position, the applicant must complete the process described on the following page. If accepted, members will need to complete training courses specific to the position(s) they will fill on the AHIMT unless they have previously completed them. This includes the five-day USFA 0-305, All-Hazards Incident Management Team Introduction course as well as the NIMS All-Hazards position specific course(s).



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Regional Incident Management Team Application Process

- 1. An application packet can be obtained from:
 - (A) A member of the TSMA AHIMT Coordinating Committee.
 - (B) The TSMA Website
- 2. The application packet must be completed in its entirety, saved as or scanned as Adobe "pdf" files, and emailed to the TSMA Coordinating committee.
- 3. A complete application package must include scans of all of the following documents:
 - (A) Completed "TSMA All Hazards Incident Management Teams Application."
 - (B) A short resume detailing your overall work experience and education in the ICS position you are applying for.
 - (C) Photocopies of the FEMA Incident Command System and any other applicable courses completed.
 - (D) Letter of support from the head of your organization or governing body which states that they understand the TSMA AHIMT program, agree that you will serve on the AHIMT.
- 4. The TSMA coordinating committee will review the application and either approve or deny the application.
 - (A) The TSMA coordinating committee may conduct interviews to establish compatibility with the AHIMT program.
- 5. An approved application will be placed on the team roster for a position assignment. Completed application or questions regarding the application should be submitted to an AHIMT Coordinating Committee Representative.

Tri State Mutual Aid AHIMT Coordinating Committee

Chattanooga Fire Department	Rick Boatwright	rboatwright@chattanooga.gov
Chattanooga Fire Department	RICK BOOLWINGIIL	-
Tri State Mutual Aid Association	Eric Mitchell	er.mitchell511@gmail.com
Catoosa County Fire Department	Daniel Walston	danielwalston@catoosa.com
Cleveland Fire Department	Pete Van Dusen	pvandusen@clevelandtn.gov
East Ridge Fire Rescue	Mike Williams	mwilliams@eastridgetn.gov
Chattanooga Fire Department	Daniel Hague	dhague@chattanooga.gov





Regional All-Hazards Incident Management Teams Application

PERSONAL INFORMATION			
First Name [space] Last Name:	Primary Phone Contact (incl a	rea code):	
Email:	Alt Phone Contact (incl area co	ode):	
Alt email:	Mailing Address:		
Street Address (Not a P.O. Box):	City/State/Zip:		
City/State/Zip:	Date of Birth:		
EMERGENCY CONTACT INFORMATION			
First Name [space] Last Name:	Primary Phone (incl area code):		
Relationship:	Secondary Phone (incl area code):		
Physician Name:	Physician Phone (incl area code):		
EMPLOYING AGENCY/PROFESS	SION/SPONSORING AGENCY INF	ORMATION	
Employing Agency	Profession	Sponsoring Agency	
Employer/Job Title	Work Phone	Supervisor Name & Phone No.	
AFFILIATION (CHECK ONE)			
Fire Service	☐ Emergency	Management	
☐ Rescue	☐ Emergency Medical Service		
Law Enforcement	Public Works		
□ Public Health	□ Other (Nam	e/Type) 	





Regional All-Hazards Incident Management Teams Application

	ICS TEAM POSITION DESIRED		
		am position you are applying for. Provide course names/numbers for any	
	cable training courses you have completed. If a lich position.	applying for more than one position you must submit a separate application	
	ledili rosidoli	indicate any course(s) completed including course Number	
	Incident Commander		
	Liaison Officer	 	
	Public Information Officer		
	Safety Officer		
	Operations Section Chief		
	Logistics Section Chief		
	Planning Section Chief		
	Finance/ Administration Section Chief		
	Communications Unit Leader		
ıL	Resources Unit Leader		
ı L	Situation Unit Leader		
	Staging Area Manager		
	Division/Group Supervisor		
	Finance/Administration Unit Leader		
I			
	CON	NFIRMATION OF AVAILABILITY	
Appli	cant availability is critical to the success o	of Incident Management Teams. Submitting this application signifies a	
	•	cises, and deployments. Deployments are not scheduled, and a	
mem	ber will be expected to answer calls and	deploy to incidents with little notice. While deployed, members likely	
will n	ot be able to communicate with family, o	co-workers, or subordinates or perform tasks for your regular	
empl	loyer. Do you foresee any significant barri	iers to your availability?	
	□ No		
	☐ Yes If yes, explain:		
			
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APPLICANT CONFIRMATION AND SIGNATURE		
By signing this application, I confirm that the information contained herein is true and correct. I further understand		
that I may be required to provide additional and detailed information necessary to complete a background		
investigation and security check as part of my application process.		
Print Name		Date
Applicant		
Signature		

SUPERVISORY APPROVALS & RECOMMENDATIONS			
I concur with the program goals, commitment, and availability of the applicant for the position applied.			
Department Head Name		Date	
Dept. Head Signature		Supervisor Title	

	COORDINATING COMMITTEE APPROVAL		
Committee Member	Signature	Date	
Committee Member	Signature	Date	