New Jersey Division of Fire Safety
PRACTICAL SKILLS EXAMINATION REPORT

Office of Training and Certification

Skill Sheet #	Certification title	
FO4-13		**Fire Officer 4** **EMERGENCY SERVICES DELIVERY** ***DISASTER PLANING***

Applicant Information		
Candidate name	DFS ID #	Course #

Evaluation

Standard:
NFPA 1021,
2020 Edition
7.6.1

Task

Develop a comprehensive disaster plan that integrates other agencies' resources, given risk, vulnerability and capability data, so that the organization can mitigate the impact to the community.

Conditions and Outcome

Given major incident policies and procedures; physical and geographic characteristics; demographics; target hazards; incident management systems; communication systems; intelligence data; contractual and mutual-aid agreements; and local, State/Provincial, and Federal regulations and resources, the student shall demonstrate the ability to analyze data, to communicate, to develop a disaster plan, and to coordinate interagency activity.

The candidate will complete this task with a minimum of 10 items answered correctly

Number	Task Steps	First Test		Retest #1		Retest #2	
		Pass	Fail	Pass	Fail	Pass	Fail
1	Identify the mission of the department.						
2	Identify the use of an Incident Management System.						
3	Identify the role of specialized decision makers.						
4	Identify delegation of authority.						
5	Identify specific tasks of management personnel.						
6	Identify the method of hazard assessment.						
7	Identify the fire department operation plan.						
8	Identify interagency cooperation and list specific agencies for response to the AHJ.						
9	Describe special considerations for Civil Disturbance Incidents.						
10	Describe proposed action plan for Comprehensive Disaster Response.						
11	Develop an executive summary.						
12	Present a summary of findings.						
Final Test Result for Entire Task							

Evaluator signature & comments, Test #1		Evaluator signature & comments, Retest #1		Evaluator signature & comments, Retest #2	
Evaluator signature	**Date**	**Evaluator signature**	**Date**	**Evaluator signature**	**Date**
Candidate signature & acknowledgement, Test #1		**Candidate signature & acknowledgement, Retest #1**		**Candidate signature & acknowledgement, Retest #2**	
By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments		**By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments**		**By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments**	
Candidate signature	**Date**	**Candidate signature**	**Date**	**Candidate signature**	**Date**

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Approved by NJ SME Committee 06/15/2021.