

Disaster / Significant Event Experience

Evidence of significant disaster and recovery management experience delineates that candidate was actively involved in the response or recovery of an actual incident or event in Nevada or as part of a Nevada supported deployment. (Please refer to page 21 for disaster definition).

The documentation must show proof of at least forty-eight (48) hours of active involvement in a single incident. (i.e. ICS form 214, Unit Log, or organizational time sheet suitable as evidence for FEMA eligible work.).

This disaster experience cannot be a duplicate of the one used in the Work History / Experience section. Exercises do

not qualify for the contribution.
Type of Disaster or Event
Date / Duration of Experience
Location of Experience
Describe the magnitude and severity on the community of the disaster:
Describe your role during the event:
Describe and leaves described from the control of the control
Describe any lessons learned from your participation in this event:
Name and phone number of individuals who can verify service
- Name and phone namber of individuals who can verify service



Exercise Leadership

Significant role in the design and/or development of a disaster exercise either full scale, functional, or tabletop.

This documentation must demonstrate active involvement in the design and/or development of an exercise, as well as describe the lessons learned as a result of the simulation.

Type of Exercise
Date & Location of Exercise
Date & Location of Exercise
Briefly Describe the Objectives of the Exercise
Describe the Exercise Scenario
Describe your role prior to, during, and after the exercise
Describe the lessons you learned from the exercise
Name and phone number of individuals who can verify service
Nume and phone number of marriadals who can verify service



Professional Membership

Active membership for three (3) consecutive years for NVEM or one (1) year for NVEM-A in an emergency management related professional organization. The basis of qualification for this contribution is the organization's mission, which should be concerned about one or more mission areas of emergency management and consistent with the protection of life and property from disaster. If the mission of the organization is not apparent by its title, it should be provided in verifiable format (such as from the organization's website). The scope of the organization should be state, national, or international. Examples include professional organizations such as IAEM, NEMA, and Association of Contingency Planners.

- a) Submit a copy of the current membership card or membership directory for each year of membership. One (1) single membership organization for the required number of years or any combination of organizations over the required period. While multiple organizations may be used, documentation of different years must be provided.
- b) NEPA membership does not qualify for this contribution since applicant must have NEPA membership to be initially eligible for certification.

Name of Association or Organization
Membership Years
Describe How the Association or Organization Relates to Emergency Preparedness
Describe Handy and Affiliation with Association Constitution Broading Value of the Constitution
Describe How Your Affiliations with Association or Organization Benefit You and the Organization You Represent



Leadership & Participation by Appointment

This is State, regional or local committee work resulting in a significant positive impact on the emergency management community. Serving as an elected/appointed officer or in a leadership position on a board of directors, board committee, task force, or special project for a professional, emergency management, or jurisdictional organization contributing to or supporting emergency management (must not be part of the applicant's required job duties).

Contributions must clearly demonstrate a commitment to the emergency management profession above and beyond that normally expected from completion of an individual's job responsibilities. Any assignment indicated in the applicant's job description does not meet the criteria for a leadership role contribution. (I.e. A contribution that does not meet the criteria is a leadership or service role on a task force or committee that is identified in your job description or part of the mission of your organization.)

- a) Applicant must demonstrate being an actual Officer or Board member, utilizing one single service role.
- b) Minimum of one (1) year participation in the leadership role.
- Documentation must be provided (i.e. Documentation may be a list of the Board/Officer members with their assignment, copy of meeting minutes listing your leadership position, etc.).

Time Frame / Length of Service
Elected Position
Organization
Description of Charge / Assignment
Describe Your Role / Contribution
Description of Product / Contribution to Emergency Management Field
Name and phone number of individuals who can verify service
Certification by Supervisor or Other Appropriate Person That This Activity Was Not Part of Routine Job Requirements



Teaching or Instruction

Complete a formal teaching or instructing commitment relating to an emergency management related course, which equals or exceeds four (4) hours of actual platform instruction where a certificate or credits are issued. The emphasis of this area is teaching an aspect of emergency management.

Examples of teaching under this category include teaching a course on emergency management at a college or university, teaching professional development course of four (4) hours or more related to emergency management, or similar instructional commitment where the emphasis is on professional emergency management topics (in person, online or distant learning is included). Teaching is intended to impart the profession of emergency management. For example, ICS or All Hazards Planning courses would be acceptable.

- a) Providing technical skills training (HAZMAT, Fire, Law Enforcement, or EMS) to technical or professional people is not teaching professional emergency management.
- b) Applicant must attach verification of teaching or instructing (I.e.: sign in sheets).

Date of Activity
Location of Activity
Organization
Length of Engagement
Description of Engagement
Name and phone number of individuals who can verify service



Publications

This refers to a publication of an emergency management article, research project, or other publication relating to the emergency management field. The article/publication must have an independent editorial review and be published in a document beyond the applicant's control (i.e. staff documents and internal reports do not qualify). Applicant must validate primary or secondary authorship. Publications in online periodicals qualify (peer review publications and about emergency management). A copy of the publication must be printed and inserted as documentation along with any explanatory details about the publisher, circulation, audience, etc. Applicants must have served as author, co-author, or contributor on publication. Play a significant role in the development or extensive revision of an educational emergency management course of at least three (3) hours in length. (Must not be part of the applicant's required job duties).

- a) Applicant must validate primary or secondary authorship.
- A copy of the publication must be printed and inserted as documentation along with any explanatory details about the publisher, circulation, audience, etc.
- Announcements, flyers, and documents written as work projects will not be considered.

Primary or Secondary Authorship
Title
Publication Source
Publication Date
Description of Publications Contributions to the Emergency Management Field
Name and phone number of individuals who can verify service
Name and phone number of individuals who can verify service
Certification by Supervisor or Other Appropriate Person That This Activity Was Not Part of Routine Job Requirements



Coordination / Cooperation

A contribution to enhance an emergency management project within the State of Nevada.

Applicant must describe the project and demonstrate that the resulting project or decisions must make a significant contribution or impact to emergency management within the State of Nevada.

Time Frame / Length of Service
Description of Project
Description of Your Role in the Project
Describe the Results of the Project
Description of Product and / or Coordination
Description of Froduct and 7 of Coordination
Name and phone number of individuals who can verify service



Special Assignment

An involvement in a special assignment for a committee, task force or working group addressing disaster/emergency management issues. The resulting product or decisions must make a significant contribution to or impact on the emergency management community.

There needs to be documentation that this assignment is an individual accomplishment rather than a position requirement. A special assignment is not something that is a core part of your job. However, a positive response does not necessarily disqualify but will require further explanation, (a letter from either the appointing authority or the committee/task force chair) describing the non-routine and special professional contribution made by the applicant.

a) Verification of assignment must be attached. Time Frame / Length of Service **Committee / Task Force Title Sponsoring Organization Description of Charge / Assignment Description of Your Role / Contribution Description of Product / Contribution to the Emergency Management Field** Name and phone number of individuals who can verify service



Professional Development

Attendance at a national or state conference or annual meeting relevant to emergency management. Acceptable conferences may be hosted by national, state, regional, or local agencies with an emergency management role.

- Training (how to) workshops do not fulfill this requirement. A one or two day meeting on a single topic is considered a workshop.
- b) Applicants cannot duplicate a conference here when they have sought the ten (10) hour training credit in the Training Section.
- Applicant must submit a verification of attendance (e.g., acknowledgment letter, certification of attendance, etc.).

Title of Conference
Sponsoring Organization
Date of Conference
Location of Conference
Description of Benefits Derived from Attendance
Name and whose wombou of individuals who are voids attendance
Name and phone number of individuals who can verify attendance



Mitigation Activity

Contributions are toward or activities in support of reducing your community's vulnerabilities to hazards.

The applicant must document a local mitigation activity that supports reducing your community hazard vulnerability (e.g., active member of the community's local mitigation strategy team, developing a mitigation program, etc.).

Time Frame / Length of Involvement
-
Description of Mitigation Activity
Description of Your Role in the Activity
Description of the Results of the Activity
Description of Coordination
Description of Coordination Name and phone number of individuals who can verify involvement



Legislative or Regulatory Committee / Commission Activity

Significant contact with an elected representative or independent governmental regulatory committee created by legislative act at the national, state or local level regarding an emergency management issue. The applicant must show that they have had an ongoing dialogue with the representative.

Applicant must submit a verification of the resulting legislative activity (e.g., original correspondence detailing the issue; agency legislative contact form or memorandum to file documenting contact and discussion details; acknowledgment letter on letterhead responding with technical specifics of issue; whitepapers, constituent surveys or data reports; certificate of appreciation, etc.).

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Date(s) of Contact	
Description of Issue	
Description of the Results of the Contact	
Name and phone number of individuals who can verify involvement	
Name and phone number of individuals who can verify involvement	



Nevada Project

Complete an Emergency Management project that increases public safety for the whole community and has positive impacts beyond your immediate jurisdiction.

Date of Issue	
Description of Professional Benefit	
Description of Professional Benefit	
Description of the Lessons Learned from you Project	
Description of the Lessons Learned Hom you Project	
Name and phone number of individuals who can verify involvement	



Nevada Support

Participate in at least one exercise (Tabletop, Functional, or Full-Scale), major planning committee, or major training program (course management & Academy type courses) hosted by a Nevada jurisdiction other than your own or assist a Nevada jurisdiction, other than your own, during an incident or event.

Name & Date of Exercise
Type of Exercise
Role in Exercise
Description of the Professional Benefit
Describe Lessons Learned from your Participation
Describe Lessons Learned from your Participation