



COURSE PUBLICITY

NT FIRE, RESCUE & EMERGENCY SERVICE (NTFRES) Emergency Management Training Unit (EMTU)

Training program name: WebEOC – Common Operating Picture	Sessions date(s) and time(s):
Training program location:	Date nominations close:
Training Program Activity Manager:	Training program contact:
Completed nominations to be sent to: EMTU, training.emtu@pfes.nt.gov.au	

Aim:

Training suited to

All members of **NT Government** (all Hazards all Agencies approach) who have been identified to undertake a role in the Emergency Management structure during declared operations or Level 2 & 3 Emergencies.

This course has **maximum candidate participation of 10** spaces. Intro to Emergency Management is a prerequisite course to the AIIMS course.

Participant commitment:

4 hours, consisting of 1/2 day of class-time.

Training program outcomes:

On completion of this training, members will be able to:

- Use the WebEOC system under supervision, in your respective functional role in all incidents to ensure safe, effective and efficient incident management.
- Demonstrate an understanding of the NTG Common Operating Picture, WebEOC (COP).
- Understand the roles and responsibilities of the functional boards in WebEOC.

Endorsement

Nominations for this training are to be supported by the nominee's supervisor. Supervisors are encouraged to discuss potential member nominations priorities with the EMTU course coordinator.

USI

A Unique Student Identifier is required from all participants applying for an accredited course. Certificates of attainment will only be issued to participants providing their USI.

General information

Participants are advised film and/or still photos may be taken during training or assessment sessions for training administration and /or NTFRES promotional purposes.

For further information please contact EMTU, training.emtu@pfes.nt.gov.au



NOMINATION FORM

NT FIRE, RESCUE & EMERGENCY SERVICE (NTFRES) Emergency Management Training Unit (EMTU)

Training program name: WebEOC – Common Operating Picture	*Training program date(s) and time(s):
*Training program location:	Nominations close:
Training program contact:	Send nominations to: training.emtu@pfes.nt.gov.au

*Your name:	Date of birth: dd / mm / yyyy	Gender: <i>(Please circle)</i> Male / Female / Other
*Your contact details: Mobile: Email:	Your (AGS) member number:	*Your unit or business area:
*Do you have a medical condition or disability? – please note all information provided will be kept confidential YES NO	Details- Please provide details and attach to this nomination all relevant documentation of how this condition is being managed e.g. medical plans	
*Do you need any assistance with reading /writing or calculations? YES NO	*Do you have any dietary needs or food allergies?- please specify	
Do you consent to film and/or still photos being taken during training or assessment sessions for training administration and /or NTFRES promotional purposes? YES NO	**Unique Student Identifier Number (USI Mandatory):	

Nominee declaration

In nominating for this course I declare that I have disclosed any medical conditions or disabilities and where relevant provided any required documentation and have met all the course pre-requisites. I have read and understood the Training Program Information will let the program contact know of any changes to any of my details as soon as possible

Your name

Signature

Date

Supervisor authorisation

I support the nomination and confirm that the person nominated holds all the entry requirements and demonstrates the behaviours required of a Crew Leader

Your name

Signature

Date

Priority 1 2 3

