SCCo RACES Credential Record **Net Control Operator Type II (N2)**

Name: _____ **Call Sign:** _____ **Jurisdiction:** _____

All activities must be performed according to the Performance Standards. For specifics of each of these requirements, consult the Credentialing Program Handbook.

Evaluator			Credential Requirements
Date	**Call Sign**	**Initials**	
			Prerequisites
			Net Control Operator Type III
			Training
			Santa Clara County ARES/RACES Training
			Level-specific training (see handbook)
			Emergency Management Training
			IS-800: Introduction to the National Response Framework
			Participation
			Min 2: net control for weekly city net or hospital net
			Min 1: net control for weekly SPECS/SVECs or approved net
			Min 1: net control at approved drill/exercise
			Min 1: net control at approved public service event or incident
			Equipment
			Field Communicator II equipment
			Knowledge
			Radio familiarity
			Cross-band repeater ops
			Managing problems
			Operator Skill
			Traffic handling: medium-to-high rate
			Traffic handling: 3rd party
			Traffic handling: operator-to-operator
			Operate on one freq while participating on another freq
			Logs and Records: 205, 211A, 214, 309, T-cards or other

Usage:

- It is the candidate's responsibility to maintain this record
- This document functions as a confirmation of completion of each credential requirement
- Bring this document with you to each evaluation attended for this credential
- Have the evaluator sign-off on each line item completed
- Retain this document as your personal record in case of error or loss of county records