

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	
			<b>Prerequisites</b>
			Shadow Communicator Type II
			<b>Training</b>
			<b>Santa Clara County ARES/RACES Training</b>
			Level-specific training (see handbook)
			<b>Emergency Management Training</b>
			ICS-300: Intermediate Incident Command System
			<b>Participation</b>
			Min 8: monitor weekly SPECS or SVECS
			Min 8: check-in on weekly city net
			Min 1: shadow at approved drill/exercise, public service or incident
			<b>Equipment</b>
			Field Communicator Type I equipment
			Level-specific equipment (see handbook)
			<b>Knowledge</b>
			Radio familiarity
			Managing problems
			<b>Operator Skill</b>
			Plan, design, set up, manage shadow comms for approved exercise or event
			Logs and Records: 202, 205, 211A, 214, 309, 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