INCIDENT PERSONNEL PERFORMANCE RATING		INSTRUCTIONS: The immediate job supervisor will prepare this form for each subordinate. It will be delivered to the planning section before the rater leaves the fire. Rating will be reviewed with employee who will sign at the bottom.															e.	
THIS RATING TO E													CE					
1. Name			2.	Inci	iden	t Na	me	and	Nun	nber	(fro	m R	esou	ırce	Ord	er)		
3. Home Unit (address)			4.	Loc	atio	n of	Ass	ignn	nent	(ad	dres	s)					_	
5. Position	6. Date of Assignment From: To				7. Acres						8. Fuel Type(s)							
	Eval	luati	on															
Enter X under appropriate ratin number follows: 0 - Deficient. Does not me DEFICIENCIES MUST 1 - Needs to improve. Me IDENTIFY IMPROVEM 2- Satisfactory. Employee	eet minimum T BE IDENT eets some or MENT NEEL	n requirement IFIED IN REI I most of the r DED IN REM	ts of MAR equi	the RKS irem S.	indi nent	vidu	ual s	tateı indi\	men ⁄idua	t.			finiti	on f	or ea	ach r	atinç	3
3- Superior. Employee co		•																
		p				9	1				ı		0/10	\ <u></u>	<u> М</u>	/	·	:c.
Rating Factors		-	0	NRC 1	2	3	0	RR(2	3	0	JF	O/IC 2	3	0	er (8	2	3
Knowledge of the job																		
Ability to obtain performance																		
Attitude																		
Interpersonal skills (ability to get along v		others)																
Decisions under stress																		
Initiative																		
Consideration for personnel welfare																		
Obtain necessary equipment and supplie																		
Physical ability for the job																		
Safety																		
Other (specify)																		
10. Remarks																		
11. Employee (signature) This	s rating has l	been discuss	ed w	vith :	me								12	2. D	ate			

14. Home Unit (address)

15. Assignment Position

16. Date

13. Rate By (signature)