

EXCELLENCE IN FIREFIGHTER PREPAREDNESS, TRAINING AND SAFETY

This award recognizes an individual or group for outstanding work in improving or enhancing wildland firefighter preparedness, safety, and training. The recipient will have developed procedures, training, guidelines, equipment, outreach, or other measures or mechanisms, or demonstrated results, innovation, collaboration, or commitment to enhance firefighter training, increase safety, or improve preparedness by increasing the capability to prevent, detect, and/or provide suppression on wildfires.

Eligible Nominees

Nominations will be accepted for individuals or groups that have excelled in the area of firefighter preparedness, training and safety at the local, state, regional or national level. ***Nominated projects/activities/actions must have been largely completed during calendar year 2004.***

Nominations will be accepted from any individual or group, on behalf of any individual or group, involved in implementing the National Fire Plan, whether federal, state, tribal or local government, partners such as associations or established organizations or contractors.

Nomination Process:

Due to delays in mail delivery procedures in Washington, D.C., we request nominations be sent **by Federal Express** (or some other express mail delivery system) to:

Simone Dupree, USDA Forest Service
National Fire Plan, Yates Building 1 NW
201 14th St. SW
Washington, D.C. 20250-0001

Emailed or faxed nominations will not be accepted. Nominations must be received **by COB November 19, 2004.** No late nominations will be accepted.

Nomination Package:

All nominations must include the following:

1. A completed Nomination Cover Sheet (a blank cover sheet is attached to this packet),
2. A CD that includes a one-page "Success Story" describing this project. The Success Story should be a brief narrative (no more than one page) describing the project, work or accomplishment and its significance to the National Fire Plan at the national, regional, state or local level (refer to the *NFP 10 year Comprehensive Strategy*). Include where and when the work occurred, who was involved, how it was planned and implemented, and why the work was important. If possible, please also include supporting images (as jpg files) (the Success Stories and supporting images will be posted on the National Fire Plan website),
3. One hard copy of the Success Story, and
4. Two pages or less in which each of the nomination criteria are addressed separately.

Criteria

Each nomination should address the following criteria:

1. Describe how an individual's or group's work accomplished the National Fire Plan's firefighting goal to improve or enhance preparedness, suppression, and firefighter safety and training.
2. Discuss how the nominee used collaboration, coordination, partnerships, and/or communities to accomplish the National Fire Plan goals. Describe who was involved, their role, and how this collaboration enhanced the work or project.
3. Describe in detail how the nominee demonstrated a commitment to the National Fire Plan under the direction of the *10-Year Strategy* and how this commitment exceeded expectations.



2004 National Fire Plan Award Nomination

This nomination cover form is required for all 2004 NFP Award Nominations. All fields on the form must be completed for the nomination application to be considered.

Award Category: *Please check the box that corresponds to the award category for which this nomination is being submitted. Please check ONE box only; if you wish to nominate the individual/group for more than one category, a separate nomination packet must be submitted for each category.*

- Excellence in Community Assistance
 - Excellence in Collaboration
 - Excellence in Hazardous Fuels Reduction
 - Excellence in Firefighter Preparedness, Training and Safety
 - Excellence in Rehabilitation and Restoration
 - Innovation in Biomass Utilization
 - Excellence in Research
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Nominee Information: *Please fill out the information below for the individual/group being nominated.*

Point of Contact (for group nominations only): *Please list one group member as the point of contact for the entire group.* _____

Nominee Name / Group Name: _____

Title & Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email address: _____

Nominee' Supervisor: _____ Supervisor Phone: _____

Supervisor's Signature: _____ **Date:** _____

Nominator Information: *Please fill out the information below for the person submitting the nomination.*

Nominator Name: _____

Title/Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email address: _____

Nominator's Signature: _____ **Date:** _____
