

<b>Individual Performance Rating</b>		<b>Instructions:</b> The immediate supervisor will prepare this form for a subordinate person. Rating will be reviewed with the individual who will sign and date the form. The completed rating will be given to the Planning Section before the rater leaves the incident.			
1. NAME:		2. INCIDENT NAME AND NUMBER		START DATE OF INCIDENT	
3. HOME UNIT ADDRESS		3. INCIDENT AGENCY AND ADDRESS			
4. POSITION HELD ON INCIDENT	5. TRAINEE POSITION	6. INCIDENT COMPLEXITY		7. DATE OF ASSIGNMENT	
<b>FFT 1</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	Acres: <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III		From/To:	
8. List the main duties from the Position Checklist, on which the position will be rated  Enter X under the appropriate column indicating the individuals level of performance for each duty listed.		PERFORMANCE LEVEL			
		Did not apply on this incident	Unacceptable	Need to Improve	Fully Successful
Provide Action/Followership (1) – <i>be competent, take initiative, learn, ask questions, develop commo skills</i>					
Build the Team (4) – <i>fire readiness of crew, gear and vehicle</i>					
Supervise and Direct Work (5-8)					
Locate and scout the fireline (9w)					
Serve as a lookout (10w) – <i>monitor and document weather</i>					
Implement appropriate line construction tactics (11w)					
Mentor and train assigned resources (12w)					
Coordinate and provide feedback to aerial resources (13w)					
Identify spot fires and slopovers (14w)					
Execute tasks with limited supervision (17w)					
Participate in WUI Operations (18w)					
Use multichannel radio correctly (20)					
Apply Risk Management Process (22). LCES (23)					
9. REMARKS					
11. THIS RATING HAS BEEN DISCUSSED WITH ME (Signature of individual being rated.)					12. DATE
13. RATED BY (Signature)		14. HOME UNIT	15. POSITION HELD ON THIS INCIDENT		16. DATE

3 copies:

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ICS FORM 226 (2025)