ICS-300: Intermediate ICS for Expanding Incidents for Operational First Responders

Department: _____

Student Name:_____

**SCFA Student I.D.#:_____

NYS Training I.D.#:_____

**Your Fire Academy I.D. number consists of the first two letters of your last name and the last four digits of your social security number.

Location	Session	Subject	Date	Instructor Signature
	1	ICS-300 1		
	2	ICS-300 2		
	3	ICS-300 3		
	4	ICS-300 4		
	5	ICS-300 5		
	6	ICS-300 6		

OR

Location	Session	Subject	Date	Instructor Signature
	1	ICS-300 A		
	2	ICS-300 B		
	3	ICS-300 C		

STUDENT NOTE: If you met the prerequisite requirement of ICS 100 & 200 on-line, you will need to attach a copy of your certificates to this personal attendance sheet before completing the classes.