

# Host Unit Fire Prevention Education Team Initial Request Worksheet

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Requesting Unit Designator: \_\_\_\_\_ Local Unit Designator: \_\_\_\_\_

Host Unit Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Preliminary Team Objectives:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Assignment Timeframe: \_\_\_\_\_ Number of Team Rotations: \_\_\_\_\_

Physical Location of Team: \_\_\_\_\_

Type of Funding for Team: \_\_\_\_\_

Assignment Budget: PP  Month

Facility Type and Address: \_\_\_\_\_

Support Available: \_\_\_\_\_

Agency Liaison Assigned:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Expected Start Time: \_\_\_\_\_

Travel Requirements: \_\_\_\_\_

Specialized Equipment Needed: \_\_\_\_\_

Team Configuration (List the needed positions for the assignment):

1. Team Leader: \_\_\_\_\_
2. Information Officer: \_\_\_\_\_
3. Team Member: \_\_\_\_\_
4. Trainee Team Leader: \_\_\_\_\_
5. Other Positions (PREV, INVF, PIOF, etc.): \_\_\_\_\_