

TASK ASSIGNMENT FORM

	1. Incident Name		2. Date prepared		4. Assignment #
			3. Time Prepared		
Operational Period:	5. Number	6. Date	7. Time began Assign.		8. Time End Assign.
A S S I G N M E N T	9. Instructions				10. Discuss <input type="checkbox"/> Press <input type="checkbox"/> Family <input type="checkbox"/> Clues <input type="checkbox"/> Summary to Date <input type="checkbox"/> Time Frame <input type="checkbox"/> Terrain <input type="checkbox"/> Anticipated POD <input type="checkbox"/> Tactics <input type="checkbox"/> Weather <input type="checkbox"/> Safety
	11. Transportation (to and from assignment)				
P E R S O N N E L	12. Function	13. Name	14. Skills & Flight Weight (lb)		15. At Briefing?
E Q U I P M E N T	17. Personal Equipment		18. Team Equipment		
C O M M O	19. Crew Call Sign / Frequency	20. Base Call Sign / Frequency		21. Pertinent Phone Numbers	
	22. Instructions				
A T T A C H	23. Check if Attached				
	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Map <input type="checkbox"/> Subject Profile <input type="checkbox"/> Subject Information </div> <div> <input type="checkbox"/> Assignment sketch on 2nd Map (photocopy OK) <input type="checkbox"/> Medical Plan </div> <div> <input type="checkbox"/> Coroner Plan <input type="checkbox"/> Rescue Plan <input type="checkbox"/> Communications planH </div> <div> <input type="checkbox"/> Organization Chart <input type="checkbox"/> <input type="checkbox"/> </div> </div>				
24. Briefing Officer:		25. Crew Leader:		26. Briefing (date / time):	
27. Prepared by:		28. Reviewed by:		29. Approved by:	
Crew Leader: Upon completion of assignment, report to briefing and turn in your copy of this form at that time. Document crew activities on back.				30. Location:	
Follow up actions <input type="checkbox"/> HUsk CompleteH <input type="checkbox"/> Task Partially Completed <input type="checkbox"/> Task CompleteH <input type="checkbox"/> Task CompleteH, POD Low <input type="checkbox"/> Clue requires Followup					