

**NJ OFFICE OF EMERGENCY MANAGEMENT
TRAINING & EXERCISE UNIT
INSTRUCTOR TRAINING PROGRAM**



APPLICATION FOR INSTRUCTOR



DEPARTMENT OF LAW AND PUBLIC SAFETY



DIVISION OF STATE OF POLICE



**HOMELAND SECURITY BRANCH
EMERGENCY MANAGEMENT SECTION
EMERGENCY PREPAREDNESS BUREAU**



NEW JERSEY STATE POLICE
HOMELAND SECURITY BRANCH
EMERGENCY MANAGEMENT SECTION
EMERGENCY PREPAREDNESS BUREAU
TRAINING & EXERCISE UNIT
P.O. Box 7068 West Trenton, NJ 08628



The New Jersey Office of Emergency Management-Training & Exercise Unit is seeking individuals who possess specialized skills, training and experience in the field of emergency management, adult education and who are already credentialed as instructors

Those individuals who possess direct experience, training and specific knowledge and interested in providing instruction in the following topics:

1. Emergency Operations Center Management G 775 or G 110 course
2. Assistance to Local Government in disasters G 205 (formerly G 270.4)
3. Re-entry and Debris management during disasters G202
4. Public Information Officer Awareness G 289
5. Public Information Officer Basic G 290
6. Community Mass Care G 108
7. Mass Fatality Management G 286
8. EOC-ICS interface G191
9. ICS 300 level G 300
10. ICS 400 level G 400
11. Mitigation G 318 or G 393
12. Emergency Planning G 235
13. Local Volunteer & Donations Management G 288
14. Warning Coordination G 272
15. Multi-Hazards for Schools G364
16. Hazardous Weather & flood Preparedness G 384
17. Management of Spontaneous Volunteers G 489
18. Rapid Needs Assessment G 557

Qualified individuals would be providing lead and assistant instruction in the EMI training courses and locally designed training within the state of NJ. as part of NJSP OEM training cadre at an established rate of compensation.

The intent is to create a training cadre who possess specific experience and training to help others in the field of emergency management, share lessons learned, experience gained. Design is to insure delivery of factual, timely and correct information to emergency responders is both effective and relevant.

For assistance or questions please contact: SEND ALL Documents to:

Theodore K. Cashel, CFEI.
NJSP TEU
P.O. Box 7068 West Trenton, NJ 08828
609-882-2000 ext 6214 Office
609-671-0160 Fax lppcash@gw.njsp.org E-mail



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Instructor Criteria

Name of Applicant _____

Profession References

Individuals who can provide details of your experience in providing Instruction

Attachment

Applicant Information

Name _____ E-mail _____
 Phone # Work _____ Phone Cell _____ Ph Home _____
 Signature _____ Address _____

Reference #1

Name _____ Title _____
 Organization/Company _____
 How do you know this person? _____ How long Have you known _____
 Phone _____ E-mail _____

Reference #2

Name _____ Title _____
 Organization/Company _____
 How do you know this person? _____ How long Have you known _____
 Phone _____ E-mail _____

Reference #3

Name _____ Title _____
 Organization/Company _____
 How do you know this person? _____ How long Have you known _____
 Phone _____ E-mail _____

Reference #4

Name _____ Title _____
 Organization/Company _____
 How do you know this person? _____ How long Have you known _____
 Phone _____ E-mail _____



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INSTRUCTOR CRITERIA

Proof of Two (2) years (100) hours Experience in providing Instruction

Applicant Information

Name _____ E-mail _____

Signature _____ Date _____

Course Information (indicate Hrs. as Lead (LI) or assistant(AI))

Course Name		Dates		Hrs.	
Location		Sponsoring Agency			

Course Name		Dates		Hrs.	
Location		Sponsoring Agency			

Course Name		Dates		Hrs.	
Location		Sponsoring Agency			

Course Name		Dates		Hrs.	
Location		Sponsoring Agency			

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Location		Sponsoring Agency			

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Location		Sponsoring Agency			

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Location		Sponsoring Agency			

Course Name		Dates		Hrs.	
Location		Sponsoring Agency			

Course Name		Dates		Hrs.	
Location		Sponsoring Agency			

Course Name		Dates		Hrs.	
Location		Sponsoring Agency			

May Include or attach any additional courses offering or presentations.



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SPECIALIZED EXPERIENCE CRITERIA

Documentation of experience in following area

Applicant Information

Name _____ E-mail _____

Signature _____ Date _____

Specialized Experience

Area of Expertise		<u>Sponsoring agency</u>	
Area of Expertise		<u>Sponsoring agency</u>	
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SPECIALIZED EXPERIENCE CRITERIA

Documentation of experience in following area

G-108 Community Mass Care Modules 1-8
G-110 Emergency Operations Center Management Modules 1-17
G-141 (formerly G265) Instructional Presentation & Evaluation Skills Module 1-5
G-191 EOC-ICS interface Modules 1-8
G-202 Re-entry and Debris management during disasters
G-205 (formerly G 270.4 Assistance to Local Government in disasters) Modules 1-15
G-235 Emergency Planning G 235 Modules 1-7
G-271 Hazardous Weather & Flooding Modules 1-8
G-272 Warning Coordination G 272 Modules 1-
G-286 Mass Fatality Management Modules 1-8
G-288 Volunteer & Donations Management G 288 Modules 1-8
G-289 Public Information Officer Awareness Modules 1-6
G-290 Public Information Officer Basic Modules 1-10
G-300 ICS 300 Modules 1-8
G-318 Mitigation G 318 Modules 1-5
G-358 Evacuation & Re-entry Modules 1-7
G-364 Multi-Hazards for Schools G364 Modules 1-9
G-384 Hazardous Weather & flood Preparedness G 384 Modules 1-
G-393 Mitigation G 393 Modules 1-9
G-400 ICS 400 Modules 1-6
G 402 ICS 402
G-556 Local damage Assessment
G-557 Rapid Needs Assessment Modules 1-7
G-775 Emergency Operations Center Management Modules 1-10
HSEEP

Other _____

Include as many OTHER training courses or topics you desire that are applicable to EM training