

BIA Burned Area Emergency Response (BAER) Team Nomination Form

APPLICATION PROCEDURE: Nominations must be submitted with the employee's supervisor's signature and emailed or faxed to Darryl Martinez at Darryl.Martinez@bia.gov or faxed to 505-563-3052 **no later than May 1, 2013.**

Nominee's Name (First)	MI Last):		
Working Job Title:		E-Mail:	
Tribe/Agency Name:		Cell #:	
Home Unit:		Mailing Address (if different):	
Street:		Street:	
City:	State:	City:	State:
Zip:	Telephone:	Zip:	Telephone:
List BAER Position(s) a	pplying for:	<u> </u>	
List training completed a	and dates pertinent to th	is position:	
List your current and pas	st qualifications pertiner	nt to this position, inc	cluding red card (IQCS):
List if you're interested i	n a Local/Tribal team, l	Regional team or Na	tional team:
Nominee's Signature:			
Supervisor's Signature:			