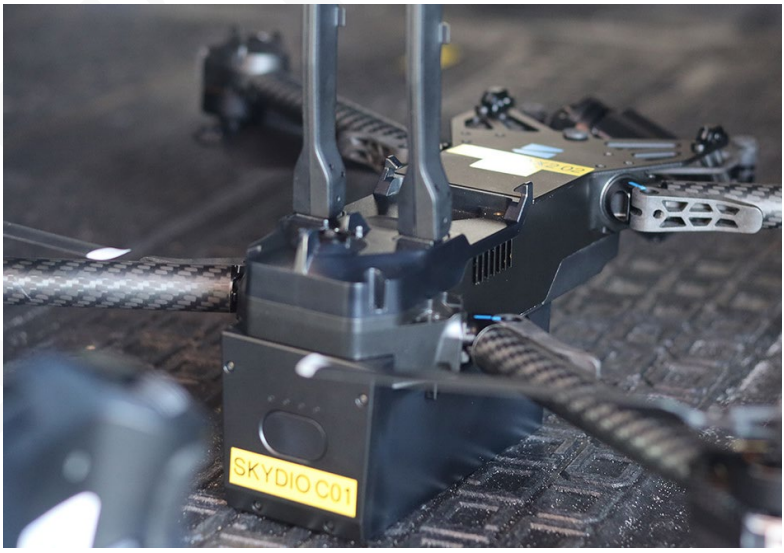

sUAS Team Self-Assessment Tool

Small Unmanned Aircraft System (sUAS) Team

Based on FEMA's Resource Typing Library Tool (RTLT)
and National Resource Typing Standards

Version 1.0 – January 2026

Specialty Response Team
Assessment Program

Overview of the Tool's Purpose

This Self-Assessment Tool is designed to support specialty response teams in evaluating their operational readiness, capabilities, and alignment with FEMA's National Incident Management System (NIMS) resource typing definitions. By following a structured, objective review of personnel qualifications, equipment inventories, deployment logistics, and operational standards, this tool enables teams to measure their current capacity against nationally recognized benchmarks for each team type (Type II – Type I).

The primary goal is to provide a realistic snapshot of each team's strengths, identify areas for growth, and guide targeted improvements through an administrative assessment. These assessments inform planning, enhance interagency coordination, and support requests for mutual aid or deployment by state and federal agencies.

Purpose of the Self-Assessment Report and Assessors' Report

Teams will utilize the self-assessment reporting tool to provide the assessors with a complete view of their capabilities, denoting what typing level the team aspires to be administratively recognized as by the Florida Division of Emergency Management. During the Assessment, Assessors will review your documentation, cache, and other supporting documentation against the RTLT and other standards to provide a typing based on observation and assessment within the Assessor's Report. Note, this Assessment does not bar the Team from responding in their jurisdictions. The Assessment merely provides recognition or guidance based on administrative observations.

Assessment Presentation and Documentation

Teams will present their finished self-assessment during a scheduled evaluation session with assessors and peer reviewers. This session is intended to validate information, discuss discrepancies, and highlight best practices.

To support the assessment presentation:

Teams should have all supporting documentation readily available, including Position Task Books (PTBs) if available, training certificates, equipment inventories, deployment rosters, standard operating guidelines (SOGs), and mutual aid agreements.

Electronic or physical formats are acceptable, but documents should be clearly labeled and accessible to assessors. Supporting materials help substantiate the team's claimed capabilities and ensure alignment with FEMA's typing and credentialing expectations. Supporting documents should be on hand for reference.

Beyond the RTLT standard and those authorities cited within it, Florida references 14 CFR Part 107, 14 CFR Part 91, F.S. 934.50, NSARC CISAR Addendum as authorities for assessing team typing and operational readiness.

Section 1: Team Identification

This section provides foundational information about your team's identity, structure, and recent operational experience. Complete this section with clear and current data, as it establishes the context for your team's readiness and capabilities throughout the assessment. This information is critical for reviewers and assessors to validate alignment with FEMA Typing standards.

Please ensure that all information provided is accurate and current as of the date of the assessment. Supporting documentation, such as a current Typing Certificate (if issued by an authority), current or recent IAPs, or a clear Organizational Chart, is highly recommended for presentation during your assessment session.

Team Name: _____

Sponsoring Agency or Jurisdiction: _____

Team Point of Contact/Program Manager (Name, Title): _____

Phone Number: _____ Email Address: _____

Financial POC: _____

Phone Number: _____ Email Address: _____

Is your agency willing to deploy your team? ☐ Yes ☐ No

If yes, are you willing to deploy: ☐ County ☐ Statewide ☐ EMAC (Out-of-State) ☐ Federal

sUAS Team Typing Level (Select the highest level of Typing you are seeking to be recognized as):

◯ Type II ◯ Type I

Section 2: Deployment/Activation/Mission History

Instructions:
This section captures a detailed summary of a recent Small Unmanned Aircraft System (sUAS) Team deployment within the past 36 months (up to 3 deployments) that reflects the team's operational capabilities and alignment with FEMA's resource typing definitions. This information will help assessors evaluate the team's ability to mobilize, operate, and sustain technical rescue functions in a real-world incident environment.

Provide complete, verifiable details. Supporting documentation should be made available during the assessment (e.g., ICS 214 Unit Logs, deployment orders, mission rosters, After-Action Reports, or issued Mission Ready Package activations).

Recommended Supporting Documentation for Assessment Presentation:

- ✓ ICS-204 Assignment List (Selected Operational Periods)
- ✓ ICS-214 Unit Logs (Selected Days)
- ✓ ICS-218 Logs (Selected Days)
- ✓ Flight logs
- ✓ Rosters
- ✓ ICS 201/202 or IAP Assignment Pages
- ✓ After Action Reports (AARs)
- ✓ Mission Ready Package Activation (if applicable)
- ✓ Photos or Maps of Operations Area (Optional)
- ✓ FAA Part 107 and/or Certificates of Authorization
- ✓ Task books (if available)

Recommended for the Presentation at Assessment Session:

- ✓ Organizational Chart (reflecting current team structure)
- ✓ Typing Certificate (if issued by state or federal authority)
- ✓ Sample products from previous deployments

Deployment/Activation/Mission Report #1

Incident Name: _____

Deployment Dates: From _____ to _____ - OR -

Total Operational Periods or Days: _____

Team Leader Name: _____

Jurisdiction or Region Supported:

City/County:_____ State: _____

Sponsoring or Tasking Agency: _____

Deployment/Activation/Mission Type:

☐ Local Mutual Aid ☐ Regional (Intrastate) ☐ State Activation (SERT/FDEM)
☐ EMAC ☐ Federal

Typing Level at Time of Deployment/Activation/Mission:

☐ Type II ☐ Type I

Deployment/Activation/Mission Type (Check all that apply):

☐ Wilderness ☐ Land ☐ Water ☐ Suburban ☐ Urban
☐ Agricultural ☐ Mountain ☐ Other: _____

Deployment/Activation/Mission Metrics

Total Team Members Deployed: _____

Average Daily Operational Tempo:

☐ Daylight ☐ Nighttime ☐ 24 hrs. (including split shifts) ☐ Other

If surge, what is the Longest Continuous Operational Period: _____ hours

Deployment/Activation/Mission Capabilities Delivered (Check all that apply):

☐ Situation Awareness ☐ Nighttime Operations ☐ Mapping ☐ Interior/Technical Search
☐ Reconnaissance ☐ Route Clearance ☐ Damage Assessment ☐ Live Stream Video
☐ Infrastructure Assessment (Bridge, etc.) ☐ Wide Area Search ☐ US&R Support
☐ LiDAR ☐ Data Management ☐ Data Processing ☐ AOB/ICS Integration
☐ UAS Resource/Mission Management ☐ Aerial Coordination (sUAS or Manned)
☐ IAP / SitRep Input

Executive Summary (Suggested 3–6 sentences)

Summarize the deployment, clearly highlighting the team's core sUAS Team functions, interagency coordination, ICS structure participation, and any significant outcomes. This should reflect the team's actual performance and readiness in a mission environment consistent with its typing.

Example:

"In September 2023, the Central County sUAS Team deployed for 2 operational periods to assist in locating an escaped inmate from the State Correctional Institute located 20 miles outside of Central City."

Deployment/Activation/Mission Narrative:

Deployment/Activation/Mission Report #2

Incident Name: _____

Deployment Dates: From _____ to _____ - OR -

Total Operational Periods or Days: _____

Team Leader Name: _____

Jurisdiction or Region Supported:

City/County:_____ State: _____

Sponsoring or Tasking Agency: _____

Deployment/Activation/Mission Type:

☐ Local Mutual Aid ☐ Regional (Intrastate) ☐ State Activation (SERT/FDEM)
☐ EMAC ☐ Federal

Typing Level at Time of Deployment/Activation/Mission:

☐ Type II ☐ Type I

Deployment/Activation/Mission Type (Check all that apply):

☐ Wilderness ☐ Land ☐ Water ☐ Suburban ☐ Urban
☐ Agricultural ☐ Mountain ☐ Other: _____

Deployment/Activation/Mission Metrics

Total Team Members Deployed: _____

Average Daily Operational Tempo:

☐ Daylight ☐ Nighttime ☐ 24 hrs. (including split shifts) ☐ Other

If surge, what is the Longest Continuous Operational Period: _____ hours

Deployment/Activation/Mission Capabilities Delivered (Check all that apply):

☐ Daylight Overwatch ☐ Nighttime Overwatch ☐ Mapping ☐ Interior/Technical Search
☐ Reconnaissance ☐ Route Clearance ☐ Damage Assessment ☐ Live Stream Video
☐ Infrastructure Assessment (Bridge, etc.) ☐ Wide Area Search ☐ US&R Support
☐ LiDAR ☐ Data Management ☐ Data Processing ☐ AOB/ICS Integration
☐ UAS Mission/Resource Management. ☐ Aerial Coordination (sUAS or Manned)
☐ IAP / SitRep Input

Executive Summary (Suggested 3–6 sentences)

Summarize the deployment, clearly highlighting the team's core sUAS Team functions, interagency coordination, ICS structure participation, and any significant outcomes. This should reflect the team's actual performance and readiness in a mission environment consistent with its typing.

Example:

"In September 2023, the Central County sUAS Team deployed for 2 operational periods to assist in locating an escaped inmate from the State Correctional Institute located 20 miles outside of Central City."

Deployment/Activation/Mission Narrative:

Deployment/Activation/Mission Report #3

Incident Name: _____

Deployment Dates: From _____ to _____ - OR -

Total Operational Periods or Days: _____

Team Leader Name: _____

Jurisdiction or Region Supported:

City/County:_____ State: _____

Sponsoring or Tasking Agency: _____

Deployment/Activation/Mission Type:

☐ Local Mutual Aid ☐ Regional (Intrastate) ☐ State Activation (SERT/FDEM)
☐ EMAC ☐ Federal

Typing Level at Time of Deployment/Activation/Mission:

☐ Type II ☐ Type I

Deployment/Activation/Mission Type (Check all that apply):

☐ Wilderness ☐ Land ☐ Water ☐ Suburban ☐ Urban
☐ Agricultural ☐ Mountain ☐ Other: _____

Deployment/Activation/Mission Metrics

Total Team Members Deployed: _____

Average Daily Operational Tempo:

☐ Daylight ☐ Nighttime ☐ 24 hrs. (including split shifts) ☐ Other

If surge, what is the Longest Continuous Operational Period: _____ hours

Deployment/Activation/Mission Capabilities Delivered (Check all that apply):

☐ Daylight Overwatch ☐ Nighttime Overwatch ☐ Mapping ☐ Interior/Technical Search
☐ Reconnaissance ☐ Route Clearance ☐ Damage Assessment ☐ Live Stream Video
☐ Infrastructure Assessment (Bridge, etc.) ☐ Wide Area Search ☐ US&R Support
☐ LiDAR ☐ Data Management ☐ Data Processing ☐ AOB/ICS Integration
☐ UAS Mission/Resource Management. ☐ Aerial Coordination (sUAS or Manned)
☐ IAP / SitRep Input

Executive Summary (Suggested 3–6 sentences)

Summarize the deployment, clearly highlighting the team's core sUAS Team functions, interagency coordination, ICS structure participation, and any significant outcomes. This should reflect the team's actual performance and readiness in a mission environment consistent with its typing.

Example:

"In September 2023, the Central County sUAS Team deployed for 2 operational periods to assist in locating an escaped inmate from the State Correctional Institute located 20 miles outside of Central City."

Deployment/Activation/Mission Narrative (Required):

Section 2: Deployment/Activation/Mission AAR/Improvement Plan

The following table allows teams to self-identify any issues and corrective action activities during the team's deployments.

Issue	Corrective Action	Anticipated Completion Date	Cost (if applicable)

Section 3: Administrative Compliance

This section verifies the administrative foundation necessary for your team's deployment readiness, legal authorization, and grant eligibility (if applicable). Strong administrative compliance ensures that the team can be deployed swiftly and legally within the framework of mutual aid systems, while also maintaining alignment with ICS/NIMS standards and risk management practices.

All information should be supported by up-to-date documentation (See Section 1 for examples) and should reflect the team's current organizational status. During the scheduled assessment, teams should be prepared to present supporting information as indicated.

Mutual Aid Agreements / Memorandums of Understanding (MOUs)

Does your team have signed mutual aid agreements or MOUs in place with neighboring jurisdictions, regional partners, or state agencies?

☐ Yes ☐ No ☐ In Progress

If yes, list the primary partners with whom agreements are active:

1. _____
2. _____
3. _____

Date of Most Recent MOU Review or Renewal: _____

Insurance Coverage and Legal Readiness

Does the team or sponsoring agency maintain insurance coverage for deployments?

☐ Yes ☐ No ☐ Unknown

Types of Coverage (Check all that apply):

☐ General Liability ☐ Workers' Compensation ☐ Auto/Vehicle
☐ Professional Liability ☐ Volunteer Liability ☐ Aviation
☐ Other: _____

Carrier Name (if known or mark self-insured): _____

(Attach current Certificate of Insurance)

Policies and Standard Operating Procedures (SOPs)

Does the team maintain written policies or SOPs related to the following items located in the table below? Space is provided to the Team to write in other examples that meet the item located in the table.

Area	Yes	No	In Progress
Program Governance and Succession Plan	☐	☐	☐
Credentialing, Identification, and Personnel Management	☐	☐	☐
Training, PTB (where applicable), and Exercise Management Plan	☐	☐	☐
Deployment Operations Plan	☐	☐	☐
Mobilization Plan	☐	☐	☐
Cache and Equipment Readiness Plan	☐	☐	☐
Finance and Grant Compliance Plan	☐	☐	☐
Communications and Technology Plan	☐	☐	☐
Records, Data, and Public Information Management	☐	☐	☐
After-Action Review and Improvement Planning SOP	☐	☐	☐
Self-Assessment and Capability Evaluation Plan	☐	☐	☐
Continuity and Concept of Operations Plan	☐	☐	☐

Mutual Aid and Stakeholder Coordination Plan	☐	☐	☐
Annual Program Reporting Framework	☐	☐	☐
FAA Certificates of Authorization (if applicable)	☐	☐	☐
Aviation Safety Management Plan	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐

Section 4: Personnel

Instructions:

This section is designed to help SAR Teams evaluate their staffing levels against the FEMA/NIMS-typed minimum personnel requirements for Type II and Type I teams. The table provides a structured method to document your team's capabilities and identify gaps or surpluses. Positions noted in standard block text come directly from the RTLT standard; those italicized are not required by the RTLT standard but are considered best practice.

How to Use the Table

Column	Description
Position	Lists nationally recognized RTLT-typed roles required on Small Unmanned Aircraft Systems.
Type II / I Columns	Indicate the **minimum required personnel** for each team type based on FEMA's RTLT resource typing definitions.
Number of qualified personnel primarily assigned and rostered in this position	Enter the **actual number of individuals** on your current roster who are **assigned and ready** to serve in that position. Individuals must be deployable and not double-counted.

Staffing Strategy and Recommendations

- Teams aiming for reliable deployment coverage should strive for **2 to 3 times the minimum requirement** listed in the table for each position.
- This depth allows for personnel rotations, shift coverage during long operations, leave/vacancy coverage, and backup deployment capabilities.
- For high-demand roles (e.g., Remote Pilot in Command), deeper staffing is highly encouraged.

Disclaimer on Double Counting

Important: Each responder may only be counted **once** in the **"Assigned and Rostered "** column, even if they hold multiple certifications or fulfill several roles.

For example, a NIMS Type 1 Tech Specialist who is also a qualified NIMS Type 1 Remote Pilot in Command should only be recorded once in their **primary assigned role**.

Minimum Totals by Team Type

At the bottom of the table, a **Totals Row** reflects the **minimum required number of personnel** for each Team type (Type II and Type I). Use this to quickly confirm if your team meets baseline compliance or needs to build roster strength in specific areas.

Position Title	Type III	Type II	Type I	Number of qualified personnel primarily assigned and rostered in this position
National Incident Management System (NIMS) Type 1 Remote Pilot in Command	NA	2	2	
NIMS Type 1 Technical Specialist–sUAS	NA	1	1	
Team Leader – RPIC (if applicable)	*NA*	*1*	*1*	
Totals	**NA**	**3**	**3**	0

Team Narrative (Optional):

Section 5: Equipment and Cache Readiness

This section assesses the team's alignment with FEMA's RTLT standards across the core equipment listed within the standard. Self-score each area using the scale below, and be prepared to reference inventory lists, cache photos, or live presentations during the assessment.

Scoring Key

3 – Fully meets standard – mission ready
2 – Substantially meets standard – minor gaps
1 – Partially meets – major gaps or dependencies
0 – Not Capable
X – Not Applicable (NA)

Teams should use NA if an area being assessed does not apply to their Team's Assessment.

Equipment – Aircraft Systems: Type II-I: Score: 3

Includes a combination of fixed-wing, lighter-than-air, and rotary-wing sUAS aircraft that meet requirements under FAA Part 107

Equipment – Information Collection. Type II: Score: 3

Includes photography and full motion video equipment, hardware, and software to create products from collected data.

Equipment – Information Collection. Type I: Score: 3

Same as Type II PLUS Specialized sensors, such as photogrammetry, sonar, radar, infrared, lidar, and hyperspectral and infrared thermography (IRT)

Equipment – Communications. Type II & I: Score: 3

Includes two-way portable radios and cell phones. sUAS Team should consider alternate forms of communication, such as satellite phones, Starlink, based on the mission assignment and team needs

Team Narrative (Optional):

Equipment Gap Identification
The following chart allows Team members to identify gaps in equipment needs and forecast costs associated with the need.

Equipment Need Description	Units Needed	Unit Cost	Cost
Grand Total			$ 0

Team Narrative (Optional):

Section 6: Operational and Support Capabilities Self-Assessment

Use the scale below to evaluate your team's capability to perform core sUAS Team functions across technical disciplines. Assessors will use these responses, along with documentation and observation, to verify mission readiness. Base your self-assessment on actual equipment, personnel, and validated training.

Scoring Key

3 – Fully meets standard – mission ready
2 – Substantially meets standard – minor gaps
1 – Partially meets – major gaps or dependencies
0 – Not Capable
X – Not Applicable (NA)

Teams should use NA if an area being assessed does not apply to their Team's Assessment.

Type II & I sUAS Teams

Situational Awareness: Score: 3

Capability: Provides situational awareness by transmitting real-time or near-real-time imagery, data, or verbal assessment, using multiple technologies, such as photogrammetry, live video, thermal imaging, and LiDAR, to enhance the Common Operating Picture (COP), planning functions, and Incident Action Plan (IAP) development.
Standard: 14 CFR Part 107, 14 CFR Part 91, F.S. 934.50, ASTM F2890, NSARC CISAR Addendum

Mapping: Score: 3

Capability: Utilizes sUAS to capture nadir still imagery, utilizes commercial or open-source software to process that imagery into a georectified orthomosaic, and publish that orthomosaic to a variety of geographic information systems (GIS) or other data sharing platforms as requested by the incident Planning Section.
Standard: 14 CFR Part 107, 14 CFR Part 91, F.S. 934.50, ASTM F2890, NSARC CISAR Addendum

Interior/Technical Search: Score: 3

Capability: Uses appropriate sUAS platforms to conduct interior and/or confined space searches in cooperation with other search and rescue resources. Communicates findings using multiple technologies including verbal assessment, live video, thermal imaging, or LiDAR
Standard: F.S. 934.50, ASTM F2890, NSARC CISAR Addendum

Reconnaissance/Route Clearance: Score: 3

Capability: Uses various sUAS platforms to conduct route (linear) or wide area reconnaissance or needs assessment and provides reports of findings to incident command, resource leadership, or the AHJ. Supporting data may include still and video imagery, written assessments, maps, or other information supporting decision-making.
Standard: 14 CFR Part 107, 14 CFR Part 91, F.S. 934.50

Damage Assessment: Score: 3

Capability: Conduct damage assessment using sUAS platforms to support recovery activities, including local/state/Federal damage reporting. The sUAS imagery is collected in accordance with accepted practices and reporting.
Standard: 14 CFR Part 107, 14 CFR Part 91, F.S. 934.50, FEMA Imagery Damage Assessment Protocol

Infrastructure Assessment: Score: 3

Capability: Uses sUAS in cooperation with subject matter experts (such as Structures Specialists, civil engineers, etc.) to conduct initial structural assessments of bridges, towers, causeways, structures, etc. SMEs may be local to the sUAS Team, or data and information may be transmitted to a remote expert.
Standard: 14 CFR Part 107, 14 CFR Part 91, F.S. 934.50, FEMA Imagery Damage Assessment Protocol

Wide Area Search: Score: 3

Capability: Integrates sUAS into wide area search in collaboration with incident command and/or the Search Manager. Provides effective products given terrain and foliage. Provides guidance and advice on proper employment of available sUAS platforms and sensors.
Standard: 14 CFR Part 107, 14 CFR Part 91, F.S. 934.50, NSARC CISAR Addendum, FEMA RTLT

Data Management and Processing: Score: 3

Capability: Collects and organizes data from one or more sUAS teams, processes collected data into products that meet the needs and standards of incident command and/or the AHJ. Supports resources such as US&R Task Force Planning Section with products to enhance situational awareness and search management. Do you have the ability to integrate with GIS software?
Standard: F.S. 934.50, NSARC CISAR Addendum, SERT Air Operations Branch Standard Operating Guide

Mission and Resource Management: Score: X

Capability: Accepts missions or data requests from incident command and/or AHJ and assigns appropriate sUAS teams/resources to ensure task completion. Manages assigned sUAS resources to meet incident objectives while ensuring safety of responders and the public.

Standard: FEMA RTLT, NSARC CISAR Addendum, SERT Air Operations Branch Standard Operating Guide

Aerial Coordination: Score: X

Capability: Coordinates with the Air Operations Branch, other assigned aviation resources (sUAS and manned), and incident command to ensure safe and effective aviation operations that meet incident objectives. Ensure compliance with FAA regulations, state and local statutes and regulations, airspace requirements, and airspace authorizations, including coordinating with the FAA Systems Operations Support Center.

Standard: 14 CFR Part 107, 14 CFR Part 91, F.S. 934.50, NSARC CISAR Addendum, SERT Air Operations Branch Standard Operating Guide, FEMA RTLT

Uses Platforms for Mission Success: Score: X

Capability: Uses various platforms based on mission need in accordance with Federal Aviation Administration (FAA) Code of Federal Regulations (CFR) Part 107 and/or applicable Certificates of Authorization (COA).

Standard: 14 CFR Part 107, 14 CFR Part 91, F.S. 934.50, ASTM F2890, NSARC CISAR Addendum, SERT Air Operations Branch Standard Operating Guide, FEMA RTLT

Team Narrative (Optional):

Section 7: Training

This section is to be utilized to review and validate the Team's current and historic training credentials. Use the scale below to evaluate your team's training credentials to assess your mission readiness.

ICS/NIMS Training Compliance

Has the team documented completion of the required ICS/NIMS training for all deployable members?

☐ Yes ☐ No ☐ Partial/In Progress

Is there a training matrix, tracker, or internal record that can be provided upon request? If yes, what tool?

☐ Yes ☐ No If Yes, what platform_____

Check all levels of ICS/NIMS training tracked across the team:

☐ IS-100 ☐ IS-200 ☐ IS-700 ☐ IS-800
☐ ICS-300 ☐ ICS-400 ☐ Position-Specific (FEMA NIMS 509)
☐ Other (specify): _____

_____

sUAS-Specific Training Compliance

Has the team documented completion of the required NIMS training for all deployable members?

☐ Yes ☐ No ☐ Partial/In Progress

Is there a training matrix, tracker, or internal record that can be provided upon request? If yes, what tool?

☐ Yes ☐ No If Yes, what platform_____

Check all levels of sUAS-specific training tracked across the team:

☐ 14 CFR Part 107 ☐ Agency Specific Training ☐ COA Required Training

Instructions for the Training Improvement Plan Table
Enter the number of team members who are currently trained and ready for each position, followed by the additional number you plan to have trained in the next thirty-six (36) months. Use the notes column to explain any gaps, upcoming training, or special considerations. This helps identify current strengths and where additional training may be needed.

Position Title	Training Goal 36 months	Notes	Cost
Grant Total			$ 0

Team Narrative (Optional):

Section 8: Exercises Evaluation

This section captures the team's recent operational testing through exercises, focusing on those that were evaluated and resulted in actionable improvement plans. It supports readiness validation for all team types and encourages continuous improvement through After-Action Review (AAR) processes.

Teams should report activities from the past 36 months and be prepared to present documentation if requested during the assessment.

Self-Assessment Metrics

Engagement Type	Count (Past 3 Years)	Evaluated?	AAR/IP Completed?	Notes or Key Lessons Applied
Full-Scale Exercises (FSE)		☐ Y ☐ N	☐ Y ☐ N	
Functional Exercises (FE)		☐ Y ☐ N	☐ Y ☐ N	
Tabletop Exercises (TTX)		☐ Y ☐ N	☐ Y ☐ N	
Drills		☐ Y ☐ N	☐ Y ☐ N	
Seminars		☐ Y ☐ N	☐ Y ☐ N	
Workshops		☐ Y ☐ N	☐ Y ☐ N	
Games		☐ Y ☐ N	☐ Y ☐ N	

Team Narrative (Optional):

Exercise After Action/Improvement Plan Table

The following table allows teams to self-identify any issues and corrective action activities for the team's exercises.

Issue	Corrective Action	Anticipated Completion Date	Cost (if applicable, NA if not)
Grand Total			$ 0

Team Narrative (Optional):

Section 9: Supplemental Information

This section provides an opportunity for the team to highlight additional capabilities, cost factors, and surge resources not captured elsewhere in the assessment. It supports strategic planning, funding justification, and deployment readiness documentation for local, state, or federal missions.

Please complete each subsection below. Supporting materials may be attached or referenced.

Recommended for the Presentation at Assessment Session

- ✓ Capability letters or team highlight one-pagers
- ✓ Cost estimate worksheet or assumptions summary
- ✓ Photos or short summaries of surge assets
- ✓ Supporting MOUs or specialty team agreements

Unique Capabilities or Surge Resources
Describe any specialized assets, personnel, or configurations that extend beyond standard FEMA's RTLT typing or give your team added mission flexibility.
Examples include deploying a SAR Team to rescue or recover a lost hiker over a 7-day period while utilizing aerial assets to spot the lost hiker.

Estimated Daily Deployment Cost
Provide the estimated average cost to deploy and sustain the team per day. This estimate may include personnel, lodging, meals, equipment use, vehicle costs, contracted services, and support trailers.

Type II: Estimated Daily Cost: $_____

Team Size this Estimate Reflects: _____ personnel

Type I: Estimated Daily Cost: $_____

Team Size this Estimate Reflects: _____ personnel

Team Narrative (Optional):

Section 10: Improvement Plan Roll-Up

The assessed team should roll up any noted items in Sections 2, 5, 7, 8, and any associated costs for review.

Section	Issue/Gap/Shortfall	Corrective Action	Anticipated Completion Date	Cost
5	*Need 2 new SAR Technicians*	*Recruit and hire 2 new SAR Technicians*	*9/30/2025*	*$95,000*
5	*Need 6 new sets of walking poles*	*Purchase 6 new sets of walking poles*	*11/1/2025*	*$700*
			Grand Total	$ 0

Section 11: Certification Statement

This section must be completed by the Agency Administrator, Fire Chief, Chief of Police/Sheriff, or Program Manager. The purpose of this statement is to affirm the accuracy and completeness of the responses provided throughout the assessment.

The certification reflects that the team has conducted a fair and honest review of its capabilities, readiness, and administrative standing, and that the information submitted may be used by oversight authorities to support planning, funding, or mutual aid coordination.

Recommended for the Presentation at Assessment Session

- ✓ Signed certification statement on agency letterhead (digital or printed)
- ✓ Original may be submitted as a scanned PDF or attached to the assessment package
- ✓ Authorized signatory must be a designated Agency Administrator, Fire Chief, Chief of Police/Sheriff, or Program Manager

Certification Statement

I hereby certify that the information provided in this assessment is accurate to the best of my knowledge and reflects the current operational status of the team identified herein. I acknowledge that this self-assessment will be used as part of a formal review process and may be referenced during planning, coordination, and deployment activities.

Team Name: _____

Sponsoring Agency: _____

Name of Certifying Official: _____

Title: _____

Phone: _____ Email: _____

Signature: _____

Date: _____