

SARASOTA COUNTY

SRQ ARES

EMERGENCY COMMUNICATIONS



Sarasota County (SRQARES) Emergency Communications West Central Florida Section TaskBook

Member Information

Name: _____

Call Sign: _____ License Class: _____

Phone: _____ Email: _____

Address: _____

Emergency Contact: _____

AUXCOMM Trained: ☐ Yes ☐ No

Red Cross Member: ☐ Yes ☐ No

Hospital Trained: ☐ Yes ☐ No

ARES Member Since: _____

☐ SRQARES Orientation Date: _____ EC/AEC Initials: _____

Required Training

ARRL ARES Courses

☐ ARES Level 1 (IS-100 + IS-700) Date: _____ EC/AEC Initials: _____

☐ ARES Level 2 (IS-200 + IS-800) Date: _____ EC/AEC Initials: _____

☐ ARES Level 3 (EC-016) Date: _____ EC/AEC Initials: _____

Continued on next page -

ICS/NIMS Courses

☐ IS-100 Date: _____ EC/AEC Initials: _____

☐ IS-200 Date: _____ EC/AEC Initials: _____

☐ IS-700 Date: _____ EC/AEC Initials: _____

☐ IS-800 Date: _____ EC/AEC Initials: _____

SRQARES-Specific Knowledge Requirements

☐ Local Repeater Plan Knowledge Date: _____ EC/AEC Initials: _____

☐ Local Simplex Plan Knowledge Date: _____ EC/AEC Initials: _____

☐ Red Cross Shelter Operations Basics Date: _____ EC/AEC Initials: _____

☐ Red Cross Shelter Operations Basics Date: _____ EC/AEC Initials: _____

☐ Winlink Basics Date: _____ EC/AEC Initials: _____

ARES Performance Tasks

☐ FLDIGI Basics Date: _____ EC/AEC Initials: _____

☐ Weather Awareness / SKYWARN Date: _____ EC/AEC Initials: _____

☐ Program a VHF/UHF radio Date: _____ EC/AEC Initials: _____

☐ Pass a formal ICS-213 message Date: _____ EC/AEC Initials: _____

☐ Send a Winlink ICS-213 Date: _____ EC/AEC Initials: _____

☐ Deploy a portable antenna Date: _____ EC/AEC Initials: _____

☐ Set up a field station Date: _____ EC/AEC Initials: _____

☐ Demonstrate proper tactical call usage Date: _____ EC/AEC Initials: _____

Continued on next page -

- ☐ Log traffic on ICS-214 form Date: _____ EC/AEC Initials: _____
- ☐ Demonstrate Sarasota activation procedures Date: _____ EC/AEC Initials: _____
- ☐ Participate in at least one SRQARES exercise Date: _____ EC/AEC Initials: _____

Net Control Operator Position

- ☐ Can run a directed net Date: _____ EC/AEC Initials: _____
- ☐ Can manage check-ins Date: _____ EC/AEC Initials: _____
- ☐ Can handle priority traffic Date: _____ EC/AEC Initials: _____

Final Qualification Sign-Off

This operator has completed all required SRQARES ARES tasks and is approved for deployment.

EC Signature: _____

Date: _____

Thank you for your interest in volunteering with SRQ ARES! We appreciate your commitment to supporting our local community through emergency communications and look forward to working with you. If you have not already done so, please fill out and submit a ROAR form which can be found on the SRQARES website at www.srqares.org and look under Forms and Documents section. Please submit to the Emergency Coordinator via email, in person, or via Winlink.