

**Federal Emergency Management Agency
EMERGENCY MANAGEMENT EXERCISE REPORTING SYSTEM**

Paperwork Burden Disclosure Notice

Public reporting burden for this form is estimated to range from 30 minutes for a limited exercise to 1 hour for a full scale exercise, with an average of 45 minutes per response at the local level. At the state level, it is estimated to average 10 minutes per response to review input, and transmit to FEMA, data received from the local level. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, SW, Washington DC 20472. You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Please do not send complete forms to the above address.

PART 1 - GENERAL INFORMATION

1. Jurisdiction	2. EMPG Funded Jurisdiction <input type="checkbox"/> Yes <input type="checkbox"/> No	3. State _____	4. State Region
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5. Type of Event Exercise <input type="checkbox"/> Tabletop <input type="checkbox"/> Functional <input type="checkbox"/> Full Scale	Exercise Credit being Requested <input type="checkbox"/> Actual Occurrence <input type="checkbox"/> Local Declaration <input type="checkbox"/> State Declaration <input type="checkbox"/> Federal Declaration	6. Focus On: <input type="checkbox"/> Mitigation <input type="checkbox"/> Response <input type="checkbox"/> Recovery	7. Date(s) of Event: Begin: ___/___/___ End: ___/___/___
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8. Hazard Scenario

Please enter only one (1) P for the Primary Hazard and one (1) or more S's for the Secondary Hazard(s)

Natural Hazards		National Security		Terrorism	
P	S	P	S	P	S
<input type="checkbox"/>	<input type="checkbox"/> Avalanche	<input type="checkbox"/>	<input type="checkbox"/> Subsidence	<input type="checkbox"/>	<input type="checkbox"/> Biological
<input type="checkbox"/>	<input type="checkbox"/> Drought	<input type="checkbox"/>	<input type="checkbox"/> Tornado	<input type="checkbox"/>	<input type="checkbox"/> Chemical
<input type="checkbox"/>	<input type="checkbox"/> Earthquake	<input type="checkbox"/>	<input type="checkbox"/> Tsunami	<input type="checkbox"/>	<input type="checkbox"/> Explosive
<input type="checkbox"/>	<input type="checkbox"/> Flood	<input type="checkbox"/>	<input type="checkbox"/> Volcano	<input type="checkbox"/>	<input type="checkbox"/> Hostage
<input type="checkbox"/>	<input type="checkbox"/> Hurricane	<input type="checkbox"/>	<input type="checkbox"/> Wild Fire	<input type="checkbox"/>	<input type="checkbox"/> Nuclear
<input type="checkbox"/>	<input type="checkbox"/> Dam Failure	<input type="checkbox"/>	<input type="checkbox"/> Winter Storm	<input type="checkbox"/>	<input type="checkbox"/> Other
	<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/> Chemical / Biological	<input type="checkbox"/>	<input type="checkbox"/> Other
		<input type="checkbox"/>	<input type="checkbox"/> Civil Disorder	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/> Conventional Attack	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/> Increased Readiness	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/> Low-Intensity Conflict	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/> Nuclear Attack	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/>

Technological / Man-made Hazards

P	S	P	S	P	S
<input type="checkbox"/>	<input type="checkbox"/> Dam Failure	<input type="checkbox"/>	<input type="checkbox"/> Power Failure	<input type="checkbox"/>	<input type="checkbox"/> Transportation Accidents
<input type="checkbox"/>	<input type="checkbox"/> Hazardous Materials – Fixed Facility	<input type="checkbox"/>	<input type="checkbox"/> Radiological – Fixed Facility	Air / Rail / Highway / Water	
<input type="checkbox"/>	<input type="checkbox"/> Hazardous Materials – Transportation	<input type="checkbox"/>	<input type="checkbox"/> Radiological – Transportation	<input type="checkbox"/>	<input type="checkbox"/> Other: _____
		<input type="checkbox"/>	<input type="checkbox"/> Structure Fires		

9. Indicate the Number of Participants in each Category

___ Appointed Officials ___ Civil Air Patrol ___ Communications ___ Elected Officials ___ Emergency Management	___ Finance ___ Fire ___ Health & Medical ___ Human Services ___ Law Enforcement	___ Local Emergency Planning Committee ___ Private Industry ___ Public Information ___ Public Participants ___ Public Works	___ Radiological ___ School Personnel ___ Search and Rescue ___ Utilities ___ Other: _____
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Please list individually for the following categories

Volunteer Agencies	Military	Federal Agencies	State

TOTAL PARTICIPANTS:

PART II - FUNCTIONS TESTED

Emergency Functions	Event Results S = Satisfactory or NI = Needs Improvement NT = Not tested	Corrective Action Requirements (Check to show that a corrective action is required.)				
		Planning	Training	Personnel	Equipment	Facilities
1. Alert / Notification						
Officials	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Response / Recovery Personnel	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Warning (Public)						
From EOC or Command Post	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outdoor Siren	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Alerting System	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Media	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Special Needs Population	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Communications						
Telephone	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teleconference	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cellular	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radio	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amateur Radio	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Satellite	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Email / Internet	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fax	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Coordination & Control						
Incident Command System	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unified Command	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EOC Operations						
Direction & Control	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EOC Facility	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternate EOC	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Power	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inter-Agency Communications	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Message Handling	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectiveness of Coordination						
Officials	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EOC Staff	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Support Services	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Resp. / Rec. Personnel	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART II - FUNCTIONS TESTED (continued)

5. Emergency Public Information

Prior to the emergency	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
During the emergency	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post-emergency period	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Centralized info. activities	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
De-centralized info. activities	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Damage Assessment

Private Sector	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Sector	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Health & Medical

Emergency Medical Services	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environment & Public Health	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mass Casualty	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Facilities	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radiological	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Individual & Family Assistance

Shelters/Relocation Centers	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evacuation	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reunification	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Food/water/clothing	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Public Safety

Law Enforcement	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Search & Rescue	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Public Works / Engineering

Debris Management	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restoration	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Transportation

Land / Ground	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personnel	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment / Supplies	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Resource Management

Donated Goods	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Volunteer Coordination	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personnel trained in response	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personnel familiar with EOP	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART II - FUNCTIONS TESTED (continued)						
Equipment Availability	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Action Steps	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mutual Aid						
Personnel from other sites	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment from other sites	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Continuity of Government						
Succession of Leadership	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pre-delegation of Authority	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safeguarding of Records	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protection of Gov't Resources	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elected/Appointed Officials	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilities and Personnel	<input type="checkbox"/> S / <input type="checkbox"/> NI / <input type="checkbox"/> NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PART III - ACTUAL OCCURRENCE						
The following information is to be provided when requesting exercise credit for an actual disaster	Number Fatalities <hr/>	Number Injured <hr/>	Number Evacuated <hr/>	Number Sheltered- <hr/>	Estimated Public Damages <hr/>	Estimated Private Damages <hr/>
PART IV - General Comments and Signatures						
General Comments						
Prepared by	Title	Date				
<input style="width:98%; height: 20px;" type="text"/>	<input style="width:98%; height: 20px;" type="text"/>	<input style="width:98%; height: 20px;" type="text"/>				
Address	Phone					
<input style="width:98%; height: 20px;" type="text"/>	<input style="width:98%; height: 20px;" type="text"/>					
<input style="width:98%; height: 20px;" type="text"/>	Email					
City	State	Zip Code	<input style="width:98%; height: 20px;" type="text"/>			
<input style="width:98%; height: 20px;" type="text"/>	<input style="width:98%; height: 20px;" type="text"/>	<input style="width:98%; height: 20px;" type="text"/>				
State Approving Official (State Exercise Training Officer)						Date

**Federal Emergency Management Agency
EMERGENCY MANAGEMENT EXERCISE REPORTING SYSTEM**

PART V - LESSONS LEARNED

Jurisdiction: _____ **Begin Date:** _____

General Comments may be entered for each function. An overall Lessons Learned Comment may be entered.

Functions

- | | | | |
|--|---------------------------------|------------------------------|------------------------------|
| 1. Alert Notification (Emergency Response) | 5. Emergency Public Information | 9. Public Safety | 13. Continuity of Government |
| 2. Warning (Public) | 6. Damage Assessment | 10. Public Works/Engineering | |
| 3. Communications | 7. Health and Medical | 11. Transportation | |
| 4. Coordination and Control | 8. Individual/Family Assistance | 12. Resource Management | |

Federal Emergency Management Agency
EMERGENCY MANAGEMENT EXERCISE REPORTING SYSTEM

PART VI - CORRECTIVE ACTION NOTES

Jurisdiction: _____ Begin Date: _____

Please identify notes by Function, Category (subfunction) and Item. Use as much space as needed.

Function	Category (subfunction)	Item	Notes
Functions			Items
1. Alert Notification (Emergency Response)	7. Health and Medical	13. Continuity of Government	1. Planning
2. Warning (Public)	8. Individual/Family Assistance		2. Training
3. Communications	9. Public Safety		3. Personnel
4. Coordination and Control	10. Public Works/Engineering		4. Equipment
5. Emergency Public Information	11. Transportation		5. Facility
6. Damage Assessment	12. Resource Management		

