



**New Jersey State Police
Office of Emergency Management**



FEMA / EMI Advanced Professional Series (APS) Checklist

Please review all requirements below for completion of your APS certificate. Include this Checklist, copies of all course certificates, and a mailing address where your APS certificate can be sent. *Please type or print your name clearly as you would like it to appear on your certificate.*

Name:	Mailing Address:
Email Address:	
Phone Number:	

REQUIRED COURSES (ALL 5 MUST BE COMPLETED)

G775	EOC Management and Operations, or IS775 EOC Management and Operations
G191	Incident Command System/Emergency Operations Center Interface, or E/L 449 ICS Train-the-Trainer
G557	Rapid Needs Assessment
G205	Recovery From Disaster, The Local Government Role, or E210 Recovery From Disaster, The Local Government Role
G393	Mitigation For Emergency Managers, or G318 Mitigation Planning For Local Governments

ELECTIVE COURSES (MUST COMPLETE ANY 5 LISTED BELOW)

G288	Local Volunteer and Donations Management
G364	Multi-Hazard Emergency Planning for Schools, or L363 Multi-Hazard Planning for Higher Education
IS703	NIMS Resource Management (Independent Study), or E/G202 Debris Management Planning for State, Local, and Tribal Officials
G386	Mass Fatality Incident Response
G361	Flood Fight Operations, or One of the IEMC Courses E900
G108	Community Mass Care and Emergency Assistance
G358	Evacuation and Re-entry Planning
G290	Basic Public Information Officer, or E388 Advanced Public Information Officer, or E/L952 All Hazards Public Information Officer
G271	Hazardous Weather and Flood Preparedness, or IS271 Anticipating Hazardous Weather and Community Risk (Independent Study)
G272	Warning Coordination
E/L/K 146	Homeland Security Exercise and Evaluation Program (HSEEP)
G235	Emergency Planning
E/L/G 141	Instructional Presentation and Evaluation Skills

Once completed, scan and attach all certificates as well as this checklist to: ftu@gw.njsp.org

Subject line: "APS Certificate Request"

For Internal Use Only			
Date Received:		Reviewed By:	
Review Date:		Complete/Incomplete:	