# CRS Update

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Arkansas-Indiana-Iowa
Kansas-Kentucky
Missouri-Nebraska
Tennessee

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## E278 — NFIP/CRS Class: September 24-27, 2012 — Kansas City, KS

FEMA and the Unified Government of Wyandotte County, Kansas City, Kansas would like to invite you to attend a 4-day course on the 2012 CRS Coordinator's Manual.

The class is limited to 35 participants.

RESERVE YOUR SPOT EARLY BY EMAIL OR FAXING YOUR APPLICATION. (Registration fee is due by August 3, 2012.)

Applications should be submitted to: Melissa Mitchell at melmitchell@wycokck.org or via fax at 913-573-8622.

# 2012 CRS Coordinator's Manual Webinar Opportunities

### Hear about points and final changes -

Date	Time	Topic
March 14	12:00 PM	330/370
March 15	10:30 AM	330/370
March 20	9:00 AM	330/370
March 20	1:30 PM	540/610
March 21	1:30 PM	540 in Florida
March 22	10:00 AM	TBD
March 22	1:30 PM	330/370
March 27	12:00 PM	General Overview
March 29	11:00 AM	540/610
*All times listed	are CST	

To register to attend a webinar please visit: www.crs2012.org

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### Goals of the Community Rating System:

- Reduce flood damage to insurable property
- Strengthen and support the insurance aspects of the NFIP
- Encourage a comprehensive approach to floodplain management

<sup>\*</sup>Additional information and a copy of the application can be found on pages 3-5 of this newsletter.

### **Ever considered putting river gage data on your website?**

If your community does not run their own gages, the following instructions can get one to the nearest USGS river gage that provides real time data on a website at <a href="http://waterdata.usgs.gov/nwis/">http://waterdata.usgs.gov/nwis/</a>

- 1. Select "Real-time data"
- 2. Select state

The simple truth is that residents

adequate flood insurance rebuild

and recover faster and return to

without. This means faster and

community is a better prepared

For communities, the lesson is clear: preparing for flooding and pursuing flood mitigation

however, it is equally critical to

prepare for the financial burdens

community and its residents and

businesses when the next flood

communities know that flood

insurance is the only guaranteed

vehicle to assure a smooth and

complete recovery for everyone

—ASFPM News & Views,

which will be placed on the

and business owners with

normal faster than people

more complete community

recovery....Experience has

shown that an insured

strategies are important,

occurs.... Self-reliant

affected.

October 2010.

community....

- 3. Identify the nearest gage site on the state map
- 4. Click on the site to open the page for that gage
- 5. Copy the site address into the community's website as a link.

The National Weather Service's gages can be found at: <a href="https://www.weather.gov/ahps/">www.weather.gov/ahps/</a>.

- -Click on the map and zoom into your area of interest. (You will see a map of your area.)
- Select the gage and copy the site address onto the community website as a link.

In both cases, provide some background information, especially to relate flood stage with historical flood levels (i.e.: in 1996, the flood crested at a stage of 14.3 feet) or a local landmark (i.e.: a flood at gage stage of 10 will cover the intersection of Main and First streets and will close the Main Street bridge).

For a good example of this, see:

http://southholland.org/index. php?page=FloodProtection/pr oblems and scroll down to "Little Calumet River Flood Levels"

### The CRS Meeting Notice and Crosswalk

When you are a community being cycled you receive via email a "Meeting Notice and Crosswalk" confirming the date/time of the visit and also identifying the documentation required at the time of the visit.

The purpose of the letter is to assist you in preparing for the time you have set aside to complete a new set of activity worksheets. The meeting notice will also tell you the anticipated time required for the meeting.

The "crosswalk" is to give you an idea of what material you will need to provide for continued CRS credit for those activities listed. This list can also be used as a check list when compiling the documentation for the meeting.

Please take advantage of the "Meeting Notice and Crosswalk" because being well prepared means less time and leaves you with fewer things to do after the visit.

### Helpful tips:

- -When providing an ordinance or resolution, please remember to always provide a signed copy.
  -It is helpful to mark documentation in the upper right-hand corner with the appropriate activity number(s).
- -Alert other staff in advance to the possibility they may be needed for a short time during the meeting if they play a key role in activities (i.e. 430, 440, 540 or 610).

### Additional information...

For additional CRS training information visit:

http://training.fema.gov/

For CRS resource information visit: <a href="http://training.fema.gov/EMIWEB/CRS">http://training.fema.gov/EMIWEB/CRS</a>

For continued updates on the CRS 2012 Manual visit: www.crs2012.org

#### DEPARTMENT OF HOMELAND SECURITY O.M.B. No. 1660-0100 See Reverse for FEDERAL EMERGENCY MANAGEMENT AGENCY Expires August 31, 2013 Privacy Act Statement GENERAL ADMISSIONS APPLICATION 1. U.S. Citizen YES SECTION I - GENERAL INFORMATION I NO If No, City and Country of Birth: 3. SOCIAL SECURITY NUMBER 2. NAME (Last, First, Middle Initial, Suffix) 4. HOME ADDRESS (Street, avenue, road no./city or town, state, and zip code) WORK PHONE NO. ( ) 6 HOME PHONE NO. ( ) 7. FAX NO. ) 8. E-MAIL ADDRESS: 9c. DATES REQUESTED (Please give three choices) 9a. ENTER COURSE CODE AND TITLE: (If you wish to apply for more than one course, 9b. COURSE LOCATION please attach a sheet of paper to this application) 10. COMPLETE THE ITEMS BELOW REGARDING THE PREREQUISITES OF THE COURSE FOR WHICH YOU ARE APPLYING COURSE/FIELD OF STUDY DEGREE/CERTIFICATE INSTITUTION 11. DO YOU HAVE ANY DISABILITIES (Including special allergies or medical disabilities) WHICH WOULD REQUIRE SPECIAL ASSISTANCE DURING YOUR ATTENDANCE IN TRAINING? (If yes, describe & indicate any special assistance required on a separate sheet) SECTION II - EMPLOYMENT INFORMATION AND AUTHORIZATION 13. CURRENT POSITION AND NUMBER OF YEARS 12a. NAME AND COMPLETE ADDRESS OF ORGANIZATION BEING REPRESENTED 12b. NFIRS # (NFA STUDENTS IN POSITION ONLY) 14. CHECK THE BOX(ES) BELOW THAT BEST DESCRIBE YOUR ORGANIZATION 15. CURRENT STATUS 14 b. ORGANIZATION 14 a. JURISDICTION ■ SPECIAL DISTRICT/TOWNSHIP 7. FOREIGN 1 ALL CAREER 1 PAID FULL TIME 1. STATEWIDE 5. FEDERAL/MILITARY (non-DHS) 8. DHS/FEMA PAID PART TIME 2. COUNTY GOVERNMENT 2. ALL VOLUNTEER 9. TRIBAL NATION ∇OLUNTEER 3. CITY/TOWN/VILLAGE INDUSTRY/BUSINESS 3 COMBINATION ☐ DISASTER RESERVIST 16. Briefly describe your activities/responsibilities as they relate to the course for which you are applying and identify how you will use the information obtained from the course. Attach an organizational chart for the organization being represented and indicate your position. If you need more space, please attach a sheet to this application. 17. CHECK **ONE** BOX IN EACH COLUMN THAT BEST DESCRIBES YOUR PRESENT PRIMARY RESPONSIBILITY AND TYPE OF EXPERIENCE AS IT RELATES TO THE COURSE FOR WHICH YOU ARE APPLYING. ALSO ENTER THE NUMBER OF YEARS OF EXPERIENCE. 17b. TYPE OF EXPERIENCE 17c. NUMBER OF YEARS OF EXPERIENCE 17a. PRIMARY RESPONSIBILITY 1. INCIDENT COMMAND MANAGEMENT 2. ADMINISTRATION/STAFF SUPPORT TRAINING/EDUCATION 17d. SIZE OF DEPARTMENT \_ 3. SUPERVISION 3. SCIENTIFIC/ENGINEERING 17e. BUSINESS TYPE 4. | BUDGET/PLANNING INVESTIGATION PROGRAM DEVELOPMENT/DELIVERY GOVERNMENT FIRE PREVENTION 6. COORDINATION/LIAISON 2. F EDUCATION 6. FIRE SUPPRESSION 7. PUBLIC EDUCATION PROGRAM/ACTIVITY 3. FIRE SERVICE 8. CODE DEVELOPMENT 8. | HEALTH LAW ENFORCEMENT CODE ENFORCEMENT/INSPECTION 9. F PUBLIC WORKS 5. VOLUNTEER AGENCY 10. DISASTER RESPONSE/RECOVERY 10. SUPPORT SERVICES 6. MERGENCY MANAGEMENT 11. EMERGENCY MEDICAL SERVICE 11. RESEARCH AND DEVELOPMENT 7. HEALTH CARE 12. HAZARD MITIGATION 12. ARSON 13. FEMERGENCY PREPAREDNESS 8. PUBLIC WORKS 13. LAW ENFORCEMENT 14. OTHER (Specify) 14. DESIGN AND PLANNING 15. OTHER (Specify) 19. GENDER 20a. ETHNICITY 18. DATE OF BIRTH Male HISPANIC or LATINO NOT HISPANIC or LATINO 20b. RACE (Please check all that apply) 5. NATIVE HAWAIIAN or PACIFIC ISLANDER 1. AMERICAN INDIAN or ALASKA NATIVE 2. ASIAN 3. BLACK or AFRICAN AMERICAN 4. WHITE

SECTION III - ENDORSEMENT AND CERTIFICATION					
21a. I certify that the information recorded on this application is correct. Falsification of information will result in denial of a course certificate and stipend (18 U.S.C. 1001).  21b. I hereby authorize the release of any and all information concerning my enrollment in this course to the chief officer in charge, or designee, of my organization. All requests for information shall be in writing from said chief or designee.					
21c. Further, I understand that the National Emergency Training Center (NETC), the Mt. Weather Emergency Operations Center (MWEOC), and the Noble Training Facility (NTF) are not authorized to provide medical or health insurance for students. I maintain appropriate insurance on an individual basis.  21d. I agree to abide by the rules, policies, and regulations of NETC, MWEOC, and NTF. Failure to do so will result in denial of the student stipend, expulsion from the course, and possible barring from future National Fire Academy (NFA) and Emergency Management Institute (EMI) and FEMA-wide courses.					
SIGNATURE OF APPLICANT			DATE		
22. APPROVAL BY THE HEAD OF THE SPONSORING ORGANIZATION					
"By signing this application, I certify that my organization does not discriminate on the basis of age, sex, race, color, religious belief, national origin, economic status, or disability in providing educational opportunities for its employees."					
22a. SIGNATURE		22b. PRINTED NAME AND TITLE			
23. ADDITIONAL ENDORSEMENTS FOR APPLICATION TO THE EMERGENCY MANAGEMENT INSTITUTE:					
23a. SIGNATURE AND DATE (State Office)		23b. SIGNATURE AND DATE (FEMA Regional Office)			
24a. FOR NFA REGIONAL DELIVERY COURSES AND COURSES DELIVERED AT EMMITSBURG, MD. SUBMIT APPLICATION TO:  NATIONAL EMERGENCY TRAINING CENTER OFFICE OF ADMISSIONS, BLDG. I-216 16825 SOUTH SETON AVENUE EMMITSBURG, MD. 21727		24b. FOR EMI AND FEMA-WIDE COURSES DELIVERED AT NETC, MWEOC, OR NTF SUBMIT APPLICATION THROUGH THE APPROPRIATE STATE EMERGENCY MANAGEMENT COORDINATOR OR FEMA REGIONAL TRAINING MANAGER TO NETC.  24c. FOR FIELD PROGRAM COURSES, SUBMIT APPLICATION TO APPROPRIATE SPONSOR.			
25. DISPOSITION ACCEPTED REJECTED	SIGNATURE OF REVIEWER		DATE		

### **EQUAL OPPORTUNITY STATEMENT**

NFA and EMI are Equal Opportunity institutions. They do not discriminate on the basis of age, sex, race, color, religious belief, national origin, or disability in their admissions and student-related procedures. Both schools make every effort to ensure equitable representation of minorities and women in their student bodies. Qualified minority and women candidates are encouraged to apply for all courses.

#### PRIVACY ACT STATEMENT

**GENERAL** - This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974), Title 5 United States Code (U.S.C.) Section 552a, for individuals applying for admission to NFA, EMI or any FEMA Agency-wide training.

AUTHORITY - Federal Fire Prevention and Control Act of 1974, as amended, Title 15 U.S.C., Sections 2201 et. seq.; Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended, Title 42 U.S.C., Sections 5121 et. seq.; Title 44 U.S.C., Section 3101; Executive Orders 12127, 12148, and 9397; Title VI of the Civil Rights Act of 1964; and Section 504 of the Rehabilitation Act of 1973.

<u>PURPOSES</u> - To determine eligibility for participation in NFA, EMI and any FEMA Agency-wide training courses. Information such as age, sex, and ancestral heritage are used for statistical purposes only.

<u>USES</u> - Information may be released to: 1) FEMA staff to analyze application and enrollment patterns for specific courses, and to respond to student inquiries; 2) a physician to provide medical assistance to students who become ill or are injured during courses; 3) Members of the Board of Visitors for the purpose of evaluating programmatic statistics; 4) sponsoring States, local officials, or State agencies to update/evaluate statistics of NFA and EMI and FEMA-wide participants; 5) Members of Congress seeking first party information; and 6) Agency training program contractors and computer centers performing administrative functions.

**EFFECTS OF NONDISCLOSURE** - Personal information is provided on a volunteer basis. Failure to provide information on this form, however, may result in a delay in processing your application and/or certifying completion of the course.

INFORMATION REGARDING DISCLOSURE OF YOUR SOCIAL SECURITY NUMBER UNDER PL 93-579, SECTION 7(b) - E.O. 9397 authorizes the collection of the SSN. The SSN is necessary because of the large number of individuals who have identical names and birthdates and whose identities can only be distinguished by the SSN. The SSN is used for recordkeeping purposes, i.e., to ensure that your academic record is maintained accurately. Disclosure of the SSN is voluntary. However, if you do not provide your SSN, another number will be substituted, which will delay processing your application or course certificate.

### PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 9 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing, reviewing, and submitting the form. You are not required to respond to this collection of information unless it displays a vaild OMB control number. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC, 20472, Paperwork Reduction Project (1660-0100). NOTE: Do not send your completed form to this address.