

SAR DEBRIEFING FORM		1. INCIDENT NAME	2. DATE PREPARED	3. TIME PREPARED
4. OPERATIONAL PERIOD	5. DATE OF ASSIGNMENT		6. BEGAN ASSIGNMENT	7. END ASSIGNMENT
8. DEBRIEFER		9. MEMBERS AT BRIEFING		
EXPLAIN WHAT YOU DID DURING YOUR ASSIGNMENT				
ESTIMATE POD'S FOR ASSIGNMENT				
DESCRIBE ANY CLUES AND THEIR LOCATION (UTM) AND WHAT IS THE STATUS OF THE CLUES				
WERE THERE ANY GAPS IN YOUR ASSIGNMENT - DESCRIBE				
HAZARD DESCRIPTIONS				
COMMUNICATION PROBLEMS				
SUGGESTIONS FOR FUTURE OPERATIONS				
Attachments	<input type="checkbox"/> ICS204 <input type="checkbox"/> ICS214 <input type="checkbox"/> Track Report <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____			