Homeland Security and Emergency Services | Interoperable and Emergency Communications

New York State Communications Unit
Position-Specific Credentialing
Application and Submission Checklist

COMU Applicant

Name: _____ _____ _____
First Name Middle Initial Last Name

Rank and/or Working Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Applicant Telephone: _____ Applicant E-mail: _____

COMU Position being applied for: ☐ COML ☐ INCM ☐ INTD ☐ RADO ☐ AUXCOMM ☐ COMT ☐ ITSL

Agency

Agency Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Agency Telephone: _____ Agency E-mail: _____

All-Hazards Course Prerequisite Training Completed

(Attach Copies of Certificates and Training Records – As Applicable)

☐ IS-100.c ☐ IS-200.c ☐ ICS-300 ☐ ICS-400 ☐ IS-700.b ☐ IS-800.c

☐ Copy of Certificate of Completion from All-Hazards Position Specific Training Course

☐ Complete and Legible All-Hazards Position Task Book (PTB) •

- All Numbered Tasks Initialed by Appropriate Evaluator
- Completed Evaluation Record for each Evaluator performing evaluation of applicant
- Final Evaluators Verification
- Agency Certification

☐ Home Agency Certification (Appendix B)

☐ Performance-Proficiency Documentation (Appendix C)

Applicant's Signature: _____ Submission Date: _____

Submit Documents by E-mail or Mail to:

New York State Division of Homeland Security and Emergency Services (NYSDHSES)
Office of Interoperable & Emergency Communications (OIEC)
1220 Washington Avenue, Building 7A, Suite 102
Albany, NY 12242
dhses.oiec@dhses.ny.gov

For SWIC & OIEC Use:

Received By: _____ Date: _____