

**Continuing Education for Prescribed Burning Job Approval Authority**

**Instructions:** For employees that have already completed 16 hours of prescribed burning awareness training, fill out name, position, field office, and location of burn in which the employee has participated. Circle the Job Approval Authority (JAA) level of the completed burn and have the burn (or fire) boss sign the form.

To provide certification for non-burn activities (such as workshop attendance or webinar completion), fill out the bottom portion of this form.

Once the form has been completed please return to the State Rangeland Management Specialist.

**Applying Prescribed Burns**

Employee Name \_\_\_\_\_ Position \_\_\_\_\_ Field Office \_\_\_\_\_

Date of Burn \_\_\_\_\_ County \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

**JAA (Circle the JAA that fits the applied burn closest)**

Planning/Applying Prescribed Fire

	<b>Level I</b>	<b>Level II</b>	<b>Level III</b>	<b>Level IV</b>	<b>Level V</b>
Burn Type	Maintenance	Maintenance	Maintenance	Maintenance	Maintenance and Reclamation
Acres	≤ 100 ac	≤ 640 ac	≤100 ac	≤640 ac	
Slope	≤5%	≤12%	≤5%	≤12%	No restrictions
Volatility	Non-Volatile Fuels (herbaceous)	Non-Volatile Fuels (herbaceous)	Volatile Fuels (cedar/heavy brush)	Volatile Fuels (cedar/heavy brush)	

By signing below, the designated burn boss for the prescribed burn, certifies that the above-named employee participated in Prescribed Burning activities at the location mentioned above.

Burn Boss Signature \_\_\_\_\_ Date \_\_\_\_\_

**For other non-burn activities (four hours needed):**

Attach Continuing Education certification (i.e., workshop attendance, other trainings, CEU certificates, etc)

**Workshop Name** \_\_\_\_\_

**Workshop Location** \_\_\_\_\_ **Workshop Date** \_\_\_\_\_

**Contact Hours** \_\_\_\_\_

**Attach:** Workshop Agenda or Workshop Flyer or Certificate of Completion or Other \_\_\_\_\_