

SEARCH AND RESCUE MISSION REPORT FIELD DISCRIPTIONS

1. County Identification Number – this number is comprised of three components:
 - a. First will be WY and your county number (i.e. WY02).
 - b. Second is the numerical number of the mission (i.e. 001).
 - c. Third is the calendar year (i.e. 11).

An example of the completed county identification number is WY02-001-11. This number starts over at number 001 at the beginning of the **CALENDAR YEAR.*
2. County Name – the name of your county.
3. Location in County – the location where the search and rescue mission took place.
4. Incident Contact – the name(s) and phone number(s) of the search and rescue member(s) who performed the mission.
5. Date and Time Mission Began – the date and time the mission started. Military time is preferred but standard time is accepted. If using standard time please be sure indicate whether it is AM or PM.
6. Mission Type – the type of mission performed: search, rescue, search/rescue, or assist.

**If you assisted another jurisdiction please list that jurisdiction's primary number in the space provided so that we do not count the mission twice.*
7. Mission Subject(s) Residence – What state the mission subjects reside.

Please provide a **NUMBER of each residency, **NOT** a check mark.*
8. Number of subjects – the number of individuals in need of assistance.
9. Mission Category – the type of activity the subjects were participating in.
10. Date and Time Mission Began – the date and time the mission ended. Military time is preferred but standard time is accepted. If using standard time please be sure indicate whether it is AM or PM.

**If the mission is ongoing, please state so in this field and provide us with updated reports as necessary until the mission is closed.*
11. Mission Resolution – the outcome of the mission.
12. Comments – a brief description of the mission and any information that you feel important or pertinent to the mission can be explained in this field.