Alaska Fire Service
Fire Operations
Fire Management Resources Section
(907)356-5668 • (Fax)(907)356-5560

Application for Fire Specialist Detail

Name:_____

Position Title:_____Series/Grade/Step:_____

Agency (BLM, NPS, FWS etc.):_____

Unit (District, Park or Refuge):_____

Business Mailing Address:_____
Street or P.O. Box City State Zip

Street Address (for FedEx):_____

Email Address:_____ Business Number:_____

Cell Number:_____ Fax Number:_____ Home Number:_____

Supervisor's Name:_____ Supervisor's Business Number:_____

Supervisor's Mailing Address:_____

Supervisor's Email Address:_____

12 week availability, base funding, line gear, PPE, and programmable radio costs approved by:

_____
Supervisor

What training and experience do you hope to attain on this detail?

What strengths will you bring to the Fire Specialist program?

TO APPLY: Mail or fax a completed Fire Specialist Detail Application, resume and a copy of your CURRENT IQCS master record (NO RED CARDS) to:

Dirk Giles
Alaska Fire Service, LLAK9F5200
P.O. Box 35005 Fort Wainwright, AK 99703
Fax: (907) 356-5560 • Office: (907) 356-5668 • Email: dgiles@blm.gov
(Follow up to assure your application has been received)