U.S. Coast Guard Auxiliary

Marine Safety Training Ribbon Application and Check-off Sheet

1. Personal Information:
   Last Name, First, MI ____________________________
   Employee Number ______________________________
   Member District – Division - Flotilla _____________________________

2. Documentation of completion of Trident training program:
   Course Date Completed w/attached copies of course completion documents
   Introduction to Marine Safety (IMSEP) ________________________
   Good Mate Manual and Course ________________________________
   Incident Command System (ICS 100) _________________________
   Incident Command System (ICS 200) _________________________
   Incident Command System (ICS 210 OR ICS 300) ________________
   National Incident Management System (IS 700) ________________
   Introduction to the National Response Plan (IS 800) ____________
   Initial Induction to Marine Safety (IIMS) ______________________
   (IIMS is not required if IMSEP test is completed after Oct 1st 2010)

3. Complete one Marine Safety Performance Qualification Standard (PQS):
   Attach Letter of Designation

4. DSO-MS Endorsement:
   “I have reviewed the information provided. It is complete and accurate. I
   recommend issuance of the Auxiliary Marine Safety Training Ribbon.”

   Name of DSO-MS: ____________________________________________
   Signature and Date: ____________________________________________

5. APPROVAL by DIRAUX
   DIRAUX signature and Date: ________________________________

INSTRUCTIONS: This form is to be completed by the member and is a part of the Application. DSO-MS
shall review and endorse and, if found satisfactory, forward to DIRAUX, Attn: OTO, for APPROVAL and
entry in Member’s Record and processing of the award.

Revised 4/12