ORDER SHEET

								PAGE		OF	
6b. ORDER PERSONNEL REQUEST DETAILS						NON-PAID			17. Logistics Section:Fulfillment		
ITEM#	Priority ³	Personnel Type & Probable Duties Indicate required license types (see list below) RN, MD, EMT-I, Pharmacist, LVN, EMT-P, NP, DVM, PA, RCP, MFT, DDS, LCSW, etc.	Number Needed	Minimum Required Clinical Experience (1=current hospital, 2=current clinical, 3=current license, 4=clinical education)	Required Skills, Training, Certs (e.g., PALS, Current ICU experience, Languages, ICS training, Addt'l Lic. i.e., PHN, etc.)	Preferred Skills, Training, Certs	Date/Time Required Indicate anticipated mobilization or duty date.	Anticipated Length of Service Indicate days or hours.	Qua Approved	ntity Filled	Tracking # or DHV Mission Number
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Additional Instructions:							Deliver to/Report to POC (Name, Title, Location, Tele#, Email, Radio, etc.)				
Staging & Deployment Details (Parking/staging location? Food/water provided? Housing Provided? Items personnel should bring? Etc.) Provide Additional on Separate Page, if needed.											