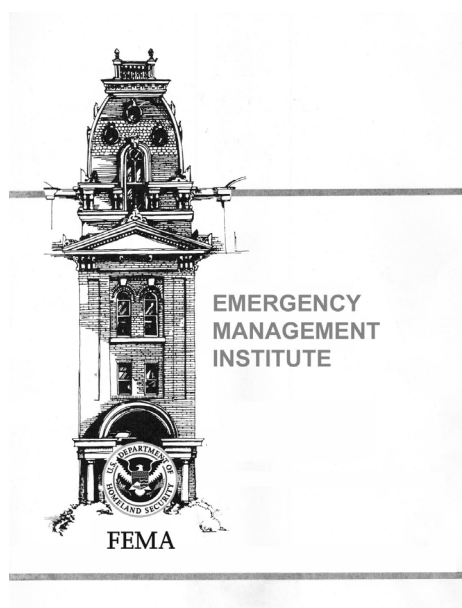


# APPENDIX B: WORKSHEETS

## Student Manual

Federal Emergency Management Agency  
Emergency Management Institute



**Community Mass Care and Emergency Assistance (G108) Worksheet**

Worksheet - Sheltering Services				
Resource – Facilities - _____(type of shelter)				
Requirements #	Provider			
	Name	Point Of Contact and #	Requirement #s met	Comments

<b>Worksheet - Sheltering Services</b>				
<b>Resource – Supplies and Equipment - _____ (type of shelter)</b>				
<b>Requirements #</b>	<b>Provider</b>			
	<b>Name</b>	<b>Point Of Contact and #</b>	<b>Requirement #s met</b>	<b>Comments</b>

Worksheet - Sheltering Services				
Resource - Staff Roles/Responsibilities - _____ (type of shelter)				
Requirements #	Provider			
	Name	Point Of Contact and #	Requirement #s met	Comments

<b>Worksheet - Sheltering Services</b>				
<b>Resource – Coordination - _____ (type of shelter)</b>				
<b>Requirements #</b>	<b>Provider</b>			
	<b>Name</b>	<b>Point Of Contact and #</b>	<b>Requirement #s met</b>	<b>Comments</b>

Worksheet - Feeding Services (FIXED)				
Resource - Facilities				
Requirements #	Provider			
	Name	Point Of Contact and #	Requirement #s met	Comments

<b>Worksheet - Feeding Services (FIXED)</b>				
<b>Resource - Supplies and Equipment</b>				
<b>Requirements #</b>	<b>Provider</b>			
	<b>Name</b>	<b>Point Of Contact and #</b>	<b>Requirement #s met</b>	<b>Comments</b>

<b>Worksheet - Feeding Services (FIXED)</b>				
<b>Resource - Staff Roles/Responsibilities</b>				
<b>Requirements #</b>	<b>Provider</b>			
	<b>Name</b>	<b>Point Of Contact and #</b>	<b>Requirement #s met</b>	<b>Comments</b>



<b>Worksheet - Feeding Services (FIXED)</b>				
<b>Resource - Coordination</b>				
<b>Requirements #</b>	<b>Provider</b>			
	<b>Name</b>	<b>Point Of Contact and #</b>	<b>Requirement #s met</b>	<b>Comments</b>

Worksheet - Feeding Services (MOBILE)				
Resource - Facilities				
Requirements #	Provider			
	Name	Point Of Contact and #	Requirement #s met	Comments

<b>Worksheet - Feeding Services (MOBILE)</b>				
<b>Resource - Supplies and Equipment</b>				
<b>Requirements #</b>	<b>Provider</b>			
	<b>Name</b>	<b>Point Of Contact and #</b>	<b>Requirement #s met</b>	<b>Comments</b>

<b>Worksheet - Feeding Services (MOBILE)</b>				
<b>Resource - Staff Roles/Responsibilities</b>				
<b>Requirements #</b>	<b>Provider</b>			
	<b>Name</b>	<b>Point Of Contact and #</b>	<b>Requirement #s met</b>	<b>Comments</b>

Worksheet - Feeding Services (MOBILE)				
Resource - Coordination				
Requirements #	Provider			
	Name	Point Of Contact and #	Requirement #s met	Comments

Worksheet - Distribution of Emergency Supplies				
Resource - Facilities				
Requirements #	Provider			
	Name	Point Of Contact and #	Requirement #s met	Comments

Worksheet - Distribution of Emergency Supplies				
Resource - Supplies and Equipment				
Requirements #	Provider			
	Name	Point Of Contact and #	Requirement #s met	Comments

Worksheet - Distribution of Emergency Supplies Resource - Staff Roles/Responsibilities				
Requirements #	Provider			
	Name	Point Of Contact and #	Requirement #s met	Comments



<b>Worksheet - Distribution of Emergency Supplies</b>				
<b>Resource - Coordination</b>				
<b>Requirements #</b>	<b>Provider</b>			
	<b>Name</b>	<b>Point Of Contact and #</b>	<b>Requirement #s met</b>	<b>Comments</b>

Worksheet - Reunification Services				
Resource - Facilities				
Requirements #	Provider			
	Name	Point Of Contact and #	Requirement #s met	Comments

Worksheet - Reunification Services				
Resource - Supplies and Equipment				
Requirements #	Provider			
	Name	Point Of Contact and #	Requirement #s met	Comments

Worksheet - Reunification Services				
Resource - Staff Roles/Responsibilities				
Requirements #	Provider			
	Name	Point Of Contact and #	Requirement #s met	Comments

Worksheet - Reunification Services				
Resource - Coordination				
Requirements #	Provider			
	Name	Point Of Contact and #	Requirement #s met	Comments