



## **Missouri Office of Homeland Security**

### **Division of Grants**

### **Information Bulletin**

### **OHS-GT-2012-006-03**

**Subject:** Policy on Utilization of the Training Request Form for  
Approved and Non-Approved Training

**Applicable To:** SHSP/NSGP/UASI

**Effective Date:** July 1, 2020

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## I. Introduction

The Missouri Office of Homeland Security (OHS), Division of Grants is providing this policy to assist local governments, state agencies and nonprofits in understanding federal and state requirements regarding utilization of the Training Request Form.

**This information bulletin replaces OHS-GT-2012-006-02 “Policy on Utilization of the Training Request Form for Approved and Non-Approved Training” dated September 26, 2018.**

## II. Purpose

Training classes funded by grants administered through the OHS must meet the following criteria:

- Address a capability or a performance gap identified through a Training and Exercise Plan, After Action Report/Improvement Plan or other applicable assessment
- Support the current Missouri Homeland Security Strategy and the Missouri Multi-Year Training and Exercise Plan (MYTEP)
- Address a gap(s) identified in the current regional or state Threat and Hazard Identification and Risk Assessment (THIRA)

The “Training Request Form” (attached) must be used by each subrecipient (jurisdiction or agency) of Homeland Security Grant Program (HSGP) funds.

## III. Overview

The Training Request Form is to be used by each subrecipient requesting approval for training associated with the OHS. This form is to be used for both pre-approved training (training sponsored by the Department of Homeland Security or the OHS) and non-approved training requests. The appropriate sections to be completed are dependent upon the type of training requested.

**Pre-Approved Training:** The OHS provides a variety of awareness and skills courses for all state and local first responders supported by state and local grant funds (the HSGP). The current catalogs of pre-approved courses can be located at the following link: [www.firstrespondertraining.gov](http://www.firstrespondertraining.gov).

**Non-Approved Training:** The use of grant funds may also be requested for other non-approved training. In order to ensure that training meets the Training and Exercise Integration (TEI)/Training Operations (TO) requirements and Missouri Homeland

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Security Strategy, additional information will be requested.

- Jurisdictions intending to use funds to support attendance for non-approved courses must meet the following guidelines:
  - Fall within the TEI/TO mission scope to prepare state and local personnel to prevent, protect against, mitigate, respond to and recover from acts of terrorism and catastrophic events;
  - Build capabilities that support a specific training need identified by the state or local government, and comport to the guidance of the State Homeland Security Strategy and with the state or urban area's THIRA;
  - Address specific core capabilities articulated in the National Preparedness Goal;
  - Support specific training activities identified in the Homeland Security Grant Program
  - Comply with FEMA Grants Program Directorate Information Bulletin #373: *Ensuring Training on Counter Terrorism and Countering Violent Extremism is Consistent with USG and DHS Policy.*
- Address specific tasks and/or competence articulated in the National Preparedness Directorate (NPD) Emergency Responder Guidelines and the Homeland Security Guidelines for Prevention and Deterrence
- Address specific competencies and tasks articulated in the Core Capabilities list and the Universal Task List (UTL)
- Comport to all applicable federal, state, and local regulations, certifications, guidelines, and policies deemed appropriate for the type of training

**Missouri University Fire and Rescue Training Institute (MU FRTI):**

The OHS has a contractual agreement with the University of Missouri Extension, Fire and Rescue Training Institute (MU FRTI) as a preferred vendor for emergency management and homeland security training support. Subrecipients are encouraged to leverage this contract when conducting local homeland security training activities.

Additional information on MU FRTI can be located at the following link:

[www.mufrti.org](http://www.mufrti.org).

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#### **IV. Operational Guidelines**

- The Training Request Form must be submitted to the OHS thirty (30) business days before the anticipated training date

NOTE: Participation in training conducted by the OHS or the SEMA (information can be located at the following link: <http://training.dps.mo.gov/>) does not require the use of the OHS Training Request Form

- Subrecipients will not legally obligate funding for training absent an approved Training Request Form being returned to them from the OHS

#### **V. Grant Contact Information**

The OHS grant points of contact can be located at the following:  
<http://www.dps.mo.gov/dir/programs/ohs/grantstraining/?h=0>

Office of Homeland Security, Division of Grants  
Lewis & Clark State Office Building  
1101 Riverside Drive  
P.O. Box 749  
Jefferson City, Missouri 65102  
Phone: 573-526-9020  
Fax: 573-526-9012



**MISSOURI OFFICE OF HOMELAND SECURITY  
DIVISION OF GRANTS**

**TRAINING REQUEST FORM**

P.O. Box 749  
Jefferson City, MO 65102  
Telephone: (573) 526-9020  
Fax: (573) 526-9012

<b>This completed form should be submitted to the Missouri Office of Homeland Security (OHS), Division of Grants, a minimum of 30 days prior to the date of the requested training, by electronic mail to the Grants Specialist.</b>			
<b>REQUESTING JURISDICTION/AGENCY</b>		<b>REGION</b>	
<b>MAILING ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>
<b>TELEPHONE NUMBER</b>		<b>FAX NUMBER</b>	
<b>CONTACT INFORMATION OR REQUESTING INDIVIDUAL</b>			
<b>NAME</b>		<b>TITLE</b>	
<b>TELEPHONE NUMBER</b>		<b>FAX NUMBER</b>	
<b>E-MAIL ADDRESS</b>			
<b>TRAINING REQUESTED:</b>			
<b>TITLE OF TRAINING</b>			
<b>PROPOSED DATE(S) OF TRAINING</b>		<b>PROPOSED LOCATION OF TRAINING</b>	
<b>TRAINING PROVIDER</b>			
<b>MO OHS SPONSORED?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, Course Number:</b> Catalog of courses can be found at: <a href="http://www.firstrespondertraining.gov">www.firstrespondertraining.gov</a>			
<b>DHS/FEMA APPROVED?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, Course Number:</b>			
<b>TRAINING DESCRIPTION:</b> If the course is <b>not</b> in a DHS catalog, please provide purpose of training, course description, qualifications of instructors/contractors. Please attach any documentation that applies: course brochure, agendas, conference materials, etc.			

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**CAPABILITIES IMPROVED:** Please provide how the proposed training will improve capabilities that are outlined in the DHS Core Capabilities found in the National Preparedness Goal, which can be located at the following link:  
<https://www.fema.gov/national-preparedness-goal>

**PROPOSED NUMBER OF PARTICIPANTS:**

**INVESTMENT JUSTIFICATION: (Please select all IJ's that apply)**

- Strengthening Information Sharing Capabilities
- Expand Regional Collaboration
- Enhance Missouri's Capabilities through Training & Exercise
- Strengthening Interoperable Communications
- Strengthen Planning & Citizen Preparedness
- Sustain CBRNE Detection and Response Capabilities
- Strengthen Missouri's Medical Surge and Mass Prophylaxis Capabilities
- Strengthen Missouri's Law Enforcement, Information Sharing and Investigation
- Implement the National Infrastructure Protection Program (NIPP)
- Citizen Council Program
- Medical Metropolitan Response System (MMRS)

**COST ESTIMATE:** (Please provide a basis for cost estimate for registration, tuition, travel, lodging, meals, parking, and any other costs that will be associated with the requested training.) (To be eligible for lodging, participants will need to live more than 75 miles from the training site.)

**Approximate Total Cost:**

**TRAINING STRATEGY ADDRESSED: (Please check all that apply.)**

- Regional Collaboration and Multi-agency Coordination
- Support Implementation of Specialized Plans
- Support Discipline-Specific Capability Development

**MISSION AREA (Choose one)\***

- Common
- Prevent
- Protect
- Respond
- Recover
- Mitigate

\*Mission Area refers to the National Preparedness Guidelines Groupings of target capabilities. "Common" capabilities cut across all mission areas and include Planning, Communications, Community Preparedness and Participation, Risk Management, and intelligence/information.

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<b>STATE GOAL(S) ADDRESS: (Please check all that apply)</b>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Enhance Communications EOC Management Citizen Preparedness & Participation Mass Care Medical Surge Emergency Public Information/Warning Critical Resource Logistics and Distribution WMD/HAZMAT Response and Decontamination Operations Other: Define and Justify:
<b>OTHER SUPPORTING INFORMATION:</b>	
<b>Training classes funded by grants administered through the OHS must meet the following criteria:</b> <ul style="list-style-type: none"> <li>• Address a capability or a performance gap identified through an After Action Report/Improvement Plan</li> <li>• Support the current Missouri Homeland Security Strategy and the Missouri Multi-Year Training and Exercise Plan (MYTEP)</li> <li>• Local jurisdictions shall receive approval of the Regional RHSOCs Training and Exercise Committee as authorized by the signature of a committee chairperson on this form</li> <li>• Unless prior coordination is made, all courses funded by OHS will be open to eligible personnel statewide.</li> </ul>	
<b>REQUESTOR'S SIGNATURE (Your typed name will serve as your signature)</b>	<b>Date</b>
The following approval signatures verify that the requested training class meets the criteria listed above.	
Approved:	
<b>THIS SECTION TO BE COMPLETED BY OHS STAFF</b>	
<b>RHSOC TRAINING AND EXERCISE COMMITTEE ENDORSEMENT</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DATE</b>
<b>CHAIRPERSON (RHSOC/RPC/COG)</b>	<b>DATE</b>
<b>MISSOURI OFFICE OF HOMELAND SECURITY, DIVISION OF GRANTS</b>	<b>DATE</b>
<b>GRANT YEAR</b> FY	<b>ESTIMATED AMOUNT</b>
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
Comments:	