

# EXERCISE NOTIFICATION MEMO (WEM)

County Directors: Please submit an electronic copy to your Regional Director within 30 days of actual exercise date. Regional Directors will forward an electronic/or hard copy to [cregg.reuter@wisconsin.gov](mailto:cregg.reuter@wisconsin.gov)



To: (Regional Director's Name)

From: (County/Tribal Director's Name)

County/City:

Exercise Date:  Exercise Time: From  To

Exercise Location:

Type of Exercise Being Conducted:

	<b>Drill</b>		<b>Workshop</b>
	<b>Seminar</b>		<b>Table Top</b>
	<b>Game</b>		<b>Functional</b>
			<b>Full Scale</b>

Type of Hazard:  Natural     Technological     National Security/Terrorism

Exercise Scenario Summary:

**Tort Liability and Worker's Compensation may be offered by the State of Wisconsin for functional or full scale exercises only. Those requesting coverage must have an identified Safety Officer for the exercise. By checking the following box the local sponsoring agency head will ensure that there is a Safety Officer in place during the exercise.**

Coverage requested:  Sponsoring Agency Head:

**Target Capabilities to be tested include** (Check All That Apply):

<input type="checkbox"/> Animal Health Emergency Support	<input type="checkbox"/> Isolation and Quarantine
<input type="checkbox"/> CBRNE Detection	<input type="checkbox"/> Law Enforcement Investigation and Operations
<input type="checkbox"/> Citizen Evacuation & Shelter-in-Place	<input type="checkbox"/> Mass Care
<input type="checkbox"/> Communications	<input type="checkbox"/> Mass Prophylaxis
<input type="checkbox"/> Community Preparedness & Participation	<input type="checkbox"/> Medical Supplies Management & Distribution
<input type="checkbox"/> Critical Infrastructure Protection	<input type="checkbox"/> Medical Surge
<input type="checkbox"/> Critical Resource Logistics and Distribution	<input type="checkbox"/> Onsite Incident Command
<input type="checkbox"/> Economic & Community Recovery	<input type="checkbox"/> Planning
<input type="checkbox"/> Emergency Operations Center Management	<input type="checkbox"/> Public Health Laboratory Testing
<input type="checkbox"/> Emergency Public Information & Warning	<input type="checkbox"/> Public Safety & Security Response
<input type="checkbox"/> Environmental Health	<input type="checkbox"/> Responder Safety & Health
<input type="checkbox"/> Epidemiological Investigation Surveillance and Investigation	<input type="checkbox"/> Restoration of Lifelines
<input type="checkbox"/> Explosive Device Response Operations	<input type="checkbox"/> Risk Management
<input type="checkbox"/> Fatality Management	<input type="checkbox"/> Structural Damage Assessment
<input type="checkbox"/> Firefighting Operations & Support	<input type="checkbox"/> Triage & Pre-Hospital Treatment
<input type="checkbox"/> Food & Agriculture Safety & Defense	<input type="checkbox"/> Search and Rescue
<input type="checkbox"/> Info Gathering & Indicators/Warnings	<input type="checkbox"/> Volunteer & Donations Management
<input type="checkbox"/> Intelligence Analysis and Production	<input type="checkbox"/> WMD/Hazardous Materials Response and Decontamination
<input type="checkbox"/> Intelligence/Info Sharing & Dissemination	