ACTIVITY LOG (ICS 214)

1. Incident Name:		2. Operational Period:	Date From: Dat	e Date To: Date		
			Time From: HH	MM Time To: HHM	M	
3. Name:		4. ICS Position:		5. Home Agency (and U	Init):	
6. Resources Assig	gned:					
Name		ICS Posi	ICS Position		Home Agency (and Unit)	
7. Activity Log:	.					
Date/Time	Notable Activities					
8. Prepared by:	Name:	Position/Title:		Signature:		
ICS 214, Page 1		Date/Time: Date				

ACTIVITY LOG (ICS 214)

1. Incident Name:		2. Operational Period:	Date From: Date	Date To: Date			
		z. Operational Feriod.	Time From: HHMM	Time To: HHMM			
7. Activity Log (continuation):							
Date/Time	Notable Activities						
8. Prepared by:	Name:	Position/Title:	Siç	nature:			
ICS 214, Page 2		Date/Time: Date					
		_ 5.15,					

ICS 214 Activity Log

Purpose. The Activity Log (ICS 214) records details of notable activities at any ICS level, including single resources, equipment, Task Forces, etc. These logs provide basic incident activity documentation, and a reference for any afteraction report.

Preparation. An ICS 214 can be initiated and maintained by personnel in various ICS positions as it is needed or appropriate. Personnel should document how relevant incident activities are occurring and progressing, or any notable events or communications.

Distribution. Completed ICS 214s are submitted to supervisors, who forward them to the Documentation Unit. All completed original forms must be given to the Documentation Unit, which maintains a file of all ICS 214s. It is recommended that individuals retain a copy for their own records.

Notes:

- The ICS 214 can be printed as a two-sided form.
- Use additional copies as continuation sheets as needed, and indicate pagination as used.

Block Number	Block Title	Instructions		
1	Incident Name	Enter the name assigned to the incident.		
2	Operational PeriodDate and Time FromDate and Time To	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.		
3	Name	Enter the title of the organizational unit or resource designator (e.g., Facilities Unit, Safety Officer, Strike Team).		
4	ICS Position	Enter the name and ICS position of the individual in charge of the Unit.		
5	Home Agency (and Unit)	Enter the home agency of the individual completing the ICS 214. Enter a unit designator if utilized by the jurisdiction or discipline.		
6	Resources Assigned	Enter the following information for resources assigned:		
	Name	Use this section to enter the resource's name. For all individuals, use at least the first initial and last name. Cell phone number for the individual can be added as an option.		
	ICS Position	Use this section to enter the resource's ICS position (e.g., Finance Section Chief).		
	Home Agency (and Unit)	Use this section to enter the resource's home agency and/or unit (e.g., Des Moines Public Works Department, Water Management Unit).		
7	Activity LogDate/TimeNotable Activities	 Enter the time (24-hour clock) and briefly describe individual notable activities. Note the date as well if the operational period covers more than one day. Activities described may include notable occurrences or events such as task assignments, task completions, injuries, difficulties 		
		 encountered, etc. This block can also be used to track personal work habits by adding columns such as "Action Required," "Delegated To," "Status," etc. 		
8	Prepared by Name Position/Title Signature Date/Time	Enter the name, ICS position/title, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).		