

OEMC TRAVEL TRIP REPORT

Please complete all fields below to complete your after travel, trip report.

TRAVELER INFORMATION

First Name Robert Last Name Ludwig

E-mail: Robert.Ludwig@cityofchicago.org Phone: 312-339-3970

Department / Agency: CHICAGO FIRE DEPT.

Section / Bureau: OPERATIONS

Job Title: CAPT/EMT

Signed copy of travel request form

Copy of ITTF Approval

TRIP INFORMATION

Event Attended: PER-290 TANK CAR SPECIALIST

Start Date: 10/8/18 End Date: 10/12/18

How did this event help you enhance your knowledge, skills, and abilities for your current position.

Being the 1ST ARRIVING company to a train derailment the SKILLS Learn will HELP me DECIDE, (detect the presence of Hazmat/wind, Estimate the likely harm with/without intervention, CHOOSE the objectives, I identify my ACTION options, Do the BEST option + Evaluate our progress.

How did this even benefit the Urban Area?

With the TRAINING in this CLASS it will HELP mitigate the scene SAFELY & quickly on Everyone's behalf.