****MICHIGAN DEPARTMENT OF NATURAL RESOURCES

**PERSONNEL CHECK-IN**

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| **Employee Information** |
| **Incident Name** |       | **Incident Number (if known)** |       |
| **Last Name** |       | **First Name**  |       | **MI** |       |
| **Preferred Name** |       |
| **Title/Classification** |       |
| **Home Unit**  |       | **SIGMA Unit Number** |       |
| **Home Unit Address** |       |
| **Unit Phone Number** |       | **Cell Phone** |       |
| **Work Email** |       |
| **Agency**  |       | **Pay Rate**  |       |
| **Direct Supervisor** |       | **Admin. Support** |       |
| **Incident Position Title (if known)** |       |

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| **Mobilization Information**  |
| **Travel Start** | **Date**       | **Time**       | **Location**       |
| **Method of Travel**  | [ ]  **Air** | [ ]  **VTS/State Owned** | [ ]  **Personal** | [ ]  **Other** |
| **Vehicle Make/Model** |       | **License Plate #** |       |
| **Check-In**  | **Date**       | **Time**       | **Location**       |
| **Demobilization** | **Date**       | **Time**       | **Location**       |
| **Comment(s)** |       |

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| **Employee Signature** |  | **Date** |       |

**Official Use Only**

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| **Government Officer’s Signature** |  | **Date** |       |
| **Entered** | Init: | Date: | **Audited** | Init: | Date: | **Submitted** | Init: | Date:  |