

<b>1. Incident Name</b>	<b>2. Operational Period (Date / Time)</b> From:	<b>ORGANIZATION ASSIGNMENT LIST</b> <b>ICS 203-OS</b>																											
<b>3. Incident Commander and Staff</b>		<b>7. OPERATION SECTION</b>																											
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## ORGANIZATION ASSIGNMENT LIST (ICS FORM 203-OS)

**Purpose.** The Organization Assignment List provides ICS personnel with information on the units that are currently activated and the names of personnel staffing each position/unit. It is used to complete the Incident Organization Chart (ICS form 207-OS) which is posted on the Incident Command Post display. An actual organization will be event-specific. **Not all positions need to be filled.** The size of the organization is dependent on the magnitude of the incident and can be expanded or contracted as necessary.

**Preparation.** The Resources Unit prepares and maintains this list under the direction of the Planning Section Chief.

**Distribution.** The Organization Assignment List is duplicated and attached to the Incident Objectives form (ICS form 202-OS) and given to all recipients of the Incident Action Plan. All completed original forms **MUST** be given to the Documentation Unit.

Item #	Item Title	Instructions
1.	Incident Name	Enter the name assigned to the incident.
2.	Operational Period	Enter the time interval for which the form applies. Record the start and end date and time.
3.	Incident Commander and Staff	Enter the names of the Incident Commander and Staff. Use at least the first initial and last name.
4.	Agency Representative	Enter the agency names and the names of their representatives. Use at least the first initial and last name.
5. thru 8.		Enter the name of personnel staffing each of the listed positions. Use at least the first initial and last name. For Units, indicate Unit Leader and for Divisions/Groups indicate Division/Group Supervisor. Use an additional page if more than three branches are activated. If there is a shift change during the specified operational period, list both names, separated by a slash.
9.	Prepared By Date Time	Enter the name and position of the person completing the form. Enter date prepared (month, day, year). Enter time prepared (24-hour clock).