



Oklahoma Office of  
**Homeland Security**  
*Prevent, Protect, Prepare*

**NIMS COURSE REQUEST FORM**  
**Minimum Registration 15 / Maximum Registration 30**

**ICS-300** (21 hours, 2 1/2 days)

**ICS-400** (16 hours, 2 days)

**G0191** (8 hours, 1 day)

**In-House Instructor Delivery**

**Instructor Name**

**If you do not have an instructor, leave blank & one will be chosen from the state list.**

**Agency Requesting  
Training**

**Dates of Training**

**Location Name**

**Location Address**

**Times  
(If different than 8-5)**

**Materials Shipping  
Address  
(No PO Boxes)**

**Host Name**

**Host Telephone**

**Host Email Address**

**Additional Information**

**INCOMPLETE FORMS WILL BE RETURNED**

**April Keeler**

State NIMS Coordinator

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