APPLICATION FOR THE EXECUTIVE PUBLIC INFORMATION OFFICER PROGRAM

PRIVACY ACT INFORMATION

The information contained on this page is subject to the Privacy Act of 1974.

TAB 1 – CANDIDATE INFORMATION

Instructions: Before completing this form packet, you must download it and save it to your PC ("Save As Other" "Reduced Size PDF"). Name the file in this format: "LastnameFirstname.EPIOP.FY26". Complete the packet in its entirety, saving your progress periodically. Follow instructions carefully and do not add any attachments. Enter the Candidate's Information below, and then type a cover letter in the space provided, requesting consideration for admission to the program and specifying your qualifications, accomplishments, and expectations of the program.

Candidate's Information

First and Last Name		Phone #	
Organization	Position/Title	Location (city & state)	
Email Address		Date completed E/L0388 APIO	
Have you applied to this program before? Yes No	Are you a Basic PIO Instructor? Yes No		

Cover Letter

TAB 2 – EPIOP RESUME

Name _____

Use only the space provided to provide your most important and relevant experience, associations, education, training, and anything else you believe should be considered. Do not add attachments.

Public Information Officer Experience

Employed or Directly Connected (ex. volunteer) with Emergency Management or Public Information: (Examples: Federal, State, Tribal, Local, Consortium EM Agencies, Public Health, NGO, or Private Sector Agencies) **PROVIDE SPECIFIC EXAMPLES LIKE: Feb 2007–Mar 2009; 2 yrs; Director, Florida EMA**

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Boards, Commission, Associations

(Some examples of service and community commitment include associations, non-profits, community organizations, boards, committees, and charitable organizations or community events, such as NIOA, NAGC, PRSA, FAPIO. Identify leadership positions held, if any.)

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Education

(**MUST** Provide: Degree Awarded, Field of Study, Name of Institution, Years Attended)

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Training & Certifications

(Title of Course, Code-if applicable, Training Location, Date Attended/Completed)

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Instructor or Other Applicable Experience

(Instructors: Include Course #s, Number of Years Active, and Approximate # of Students Taught)
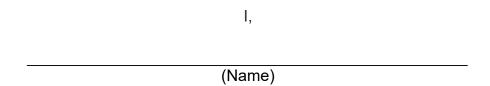
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TAB 3 – COMMITMENT STATEMENT

Federal Emergency Management Agency
National Disaster and Emergency Management University
Executive Public Information Officer Program Commitment Statement

The Executive Public Information Officer Program (EPIOP) consists of three resident courses, each are 5 days, held at the National Disaster and Emergency Management University over a period of 1 fiscal year. All three courses (E0389, E0393, and E0394) must be attended in sequence. The series also includes pre-course assignments, classroom activities, and a final paper within the assigned deadlines.

By signing the last tab of this package, I commit to participate fully in the program's in-class three courses over 1 fiscal year by completing each course in sequence. I commit to completing all pre-course assignments, participating in classroom activities, and completing the final paper.

The course schedule, with <u>tentative</u> dates, includes the following courses. More information can be found at Executive Public Information Officer Program (https://training.fema.gov/programs/public-information-officer/executive/).

1. E0389 – Executive Public Information Officer – (5 days) – December 8–12, 2025

2. E0393 – Executive Public Information Management – (5 days) – June 8–12, 2026

3. E0394 – Executive Public Information Application – (5 days) – September 14–18, 2026

I,

_____
(Name)

understand and agree to the requirements of completing
all activities of the **Executive Public Information Officer Program.**

You and your supervisor will endorse this Commitment Statement at Tab 5.

Please do not add a signature field to this tab. To sign Tab 5, click once in the signature field, then either select your ID, or create a new one by clicking "Configure a new Digital ID" then "Create a New Digital ID".

TAB 4 – QUESTIONNAIRE

Federal Emergency Management Agency
Executive Public Information Officer Program

Name (Last, First): _____
Your answers will be reviewed by the selection committee to determine the most qualified candidates.
Use only the space provided for each question. Do not add attachments.

1. What led you to apply to this program?

(Max 1700 characters; about 300 words)

2. Describe your social media presence (if applicable).

(Max 1000 characters; about 200 words)

3. What do you know about our program and how does it align with your goals?

(Max 1700 characters; about 300 words)

4. If selected, how will you use what you learn to serve your community and the profession?

(Max 1700 characters; about 300 words)

5. How will your professional and leadership experience help you contribute to the program?

(Max 1700 characters; about 300 words)

6. Describe your most challenging public communication issue and how it affects reaching your organization's goals.

(Max 1700 characters; about 300 words)

7. Outline the steps of the strategic communications wheel that you have applied to a recent incident, event, or campaign.

(Max 1700 characters; about 300 words)

8. Please submit three ideas for the final EPIOP paper requirement.

(Max 1700 characters; about 300 words)

TAB 5 – ENDORSEMENT AND SIGNATURES

Supervisor: The selection panel finds candid recommendations helpful in choosing from among highly qualified candidates. Please use the space provided to help us get a better understanding of this candidate.

Recommendation Letter

Signatures

My signature below acknowledges that I am applying to the Executive Public Information Officer Program, and that I am committed to completing the program requirements as defined in the commitment statement. I understand that my attendance is subject to selection by the approving authority. I agree to submit to inquiries for additional information, and I understand that any false statement or misrepresentation made during these proceedings may result in the revocation of this application. I give permission for verification of information contained herein.

Candidate's Signature:

My signature below acknowledges that I fully support and endorse this candidate's application to the Executive Public Information Officer Program. I understand the attendance requirements and agree to release the candidate from work to attend and fully participate in the program as defined in the commitment statement.

Supervisor's Signature: