



FD Name _____



2011-2012 FIRE DEPARTMENT TRAINING REQUEST STATE FIRE/RESCUE TRAINING AREA 13

Place an X in the left column next to the requested subject. Indicate the number of hours requested for each subject in the right column.

A-0000	___ Admin & Organization	___
B-0000	___ Safety	___
C-0000	___ Fire Alarm & Communications	___
D-0000	___ Fire Behavior	___
E-0000	___ Extinguishers	___
F-0000	___ Personal Protective Equipment	___
G-0000	___ Forcible Entry	___
H-0000	___ Ventilation	___
I-0000	___ Ropes	___
J-0000	___ Ladders	___
K-0000	___ Fire Hose/Nozzles/Appliances	___
L-0000	___ Foam Fire Streams	___
M-0000	___ Fire Control	___
N-0000	___ Salvage	___
O-0000	___ Overhaul	___
Q-0000	___ Rescue	___
R-0000	___ Water Supply	___
S-0000	___ Sprinklers Training	___
T-0000	___ Response to HazMat Training	___
U-0000	___ Fire Prevention/Public Fire Ed	___
V-0000	___ Building Construction	___
W-0000	___ Aircraft Crash Firefighting	___
X-0000	___ Emergency Disaster Planning	___
Z-0000	___ Pumper Ops & Maintenance	___
AA-0000	___ Fire Officers Training	___
CC-0000	___ Drivers Training	___

Any person with (0) training hours as of July 1, 2000, must also complete the (8) hour Survival course. These hours will be added to category "FC1000".

Any person with (0) training hours as of July 1, 2001 must complete the sixteen (16) hour Survival and Rescue Course. These hours will be added to categories "FC1000" and "FC2000". These persons will also be required to complete a four (4) hours Wildland Firefighting Awareness Course in category "FC3000".

Any person with (0) training hours as of July 1, 2010, must also complete eight (8) hours of HazMat Awareness training and sixteen (16) hours of HazMat Operations training.

ADDITIONAL TRAINING

Place an X on the line next to the requested subject. The number of hours will vary based upon the subject being taught.

Apparatus

- Pumps (How to Test)
- Pump Operations
- Tanker Operations
- Maintenance

Emergency Medical

- AED
- CPR Pro Rescuer
- CPR Pro Recertification
- Blood borne pathogens
- First Aid

Rescue

- Rope Rescue (High or Low Angle)
- Vehicle Rescue (Auto Extrication)

NIMS

- ICS 100
- ICS 200
- ICS 700
- ICS 800

Other:

- hrs _____
 - hrs _____
-

Emergency Vehicle

- Emergency Vehicle Operations
- EVO cone course
- Hwy Crash Site Management
- Emergency Traffic Control

Hazardous Materials

- HazMat Awareness
- Awareness Update
- HazMat Operations
- Operations Update

Arson Detection

- Arson Detection 1st Responder

Wildland

- Wildland Fire Awareness

SCHEDULING AND CONTACT INFORMATION

DEPT NAME _____

ADDRESS _____

Street Address

City

Zip Code

Station Phone () _____ Fax () _____

Chief _____

Chief's phone number () _____ Cell # () _____

Chief's email address _____

Asst. Chief _____ Contact () _____

Asst. Chief's email address _____

Training Officer _____ Contact () _____

Training Officer's email address _____

Training night _____

Time – All week night classes will start at 6:30 pm

Specify what week (if needed) 1st 2nd 3rd 4th 5th Any

Month you would like to begin? _____

Chief's signature _____

Date _____

Please complete the above information so that we will be able to update our records.