

State Fire Marshal Training Division

Fire-Fighter I

Application for Candidacy

(NOTE: Please type all pertinent data in the form below before printing)

Test Date(s) Test Location(s) Test Time(s)

I , a member of the

(First, Middle Initial, Last Name) (Organization, if applicable)

Wish to formally submit an application to become a candidate for Fire Fighter I certification per the policy and procedures of the State Fire Marshal Training Division. I understand the sequence for testing, which includes Practical or Performance Skills Examinations (Interior Fire Attack and General Skills) and a Written Examination. I also understand that all PSE tests must be successfully completed before I qualify for the Written Examination, and my name must appear on a qualifications list before I will be permitted to enter any certification test site.

Applicant Signature <input style="width: 300px; height: 25px;" type="text"/>	Date of Birth <input style="width: 150px; height: 25px;" type="text"/>
Applicant Mailing Address: <input style="width: 300px; height: 25px;" type="text"/>	Student ID# <input style="width: 150px; height: 25px;" type="text"/>
Home Phone# <input style="width: 300px; height: 25px;" type="text"/>	Cell Phone # <input style="width: 150px; height: 25px;" type="text"/>

RETURN THIS FORM TO: State Fire Marshal Training Division
 3347 West Capital Ave
 Grand Island, NE 68801
 Attn: Melissa

For SFMTD Office Use Only

Application Deadline:		Payment Description Option
Course Work Verified		Candidate Paid:
Approval Date		Billed Dept:
Disapproval Date		SEM= Score:
Exam Taken	IFA-PSE PSE WE	Test#:
Nebraska Certification #		NPQS#:
		IFSAC#:

Print Form