

# DSFS - Certification Prerequisite Completion Application

*Please print clearly*

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Fire Department/Company Affiliation: \_\_\_\_\_

Proboard ID #: \_\_\_\_\_ (4 digit code associated with your certifications)

## Previous NFPA Certification Course Completed

## Original Course Completion Date

1002 Driver Operator Aerial	1002-20	2017	_____
1002 Driver Operator Tiller	1002-30	2017	_____
1021 Fire Officer 1	1021-10	2019	_____
1021 Fire Officer 2	1021-20	2019	_____
1021 Fire Officer 3	1021-30	2019	_____
1021 Fire Officer 4	1021-40	2019	_____
1041 Live Fire Instructor	1041-60	2018	_____
1041 Live Fire Instructor-in-Charge	1041-70	2018	_____
1072 Hazardous Materials Operations	1072-27	2017	_____
1072 Hazardous Materials Technician	1072-40	2017	_____
1072 Hazardous Materials IC	1072-50	2017	_____
472 Hazardous Materials Branch Officer	472-81	2018	_____
472 Hazardous Materials Safety Officer	472-91	2018	_____

Completed Prerequisite(s) \_\_\_\_\_

***Copies of certificates of prerequisite training and national certification must be attached with application.***

Prerequisite completion must be within 2 years of original course completion (or before acceptance of new standard)

**I attest that I have completed the prerequisite training and/or certification is attached with this application.  
I understand that if all documentation is not attached, the application will not be accepted and will be returned.**

Candidate Signature \_\_\_\_\_ Date \_\_\_\_\_

**I attest that I have approved this Candidate's application for testing, and that all required documentation is attached. The Candidate is physically able to perform the physical tasks for testing, and any medical, first aid, or related charges will be the responsibility of the sponsoring organization.**

Authorizing Officer Signature \_\_\_\_\_ Date \_\_\_\_\_

Authorizing Officer Name & Rank \_\_\_\_\_ Phone: \_\_\_\_\_  
(Print)