

Department of Emergency Services and Public Protection COMMISSION ON FIRE PREVENTION AND CONTROL

FIRE SERVICE INSTRUCTOR III EXAMINATION APPLICATION FOR CONNECTICUT CERTIFICATION

NOTE: Application for examination is due at least ten (10) days prior to the scheduled examination. *Late applications will not be accepted or processed.*

Please **PRINT** all information legibly as it will appear on your permanent records. B Both the instructor and candidate must complete this entire application prior to submission.

APPLICANT DATA MI Last name First name Home Street Address Town State Zip Code Telephone Cell (____) Home (Work () Fire Department Name: Fire Department City/Town: Fire Fighter (Check One): Email Address: Career ☐ Volunteer ☐ Your ID consists of the first (3) letters of your last name and the last four (4) numbers of your social security number. ID Number __ _ - _ _ - _ _ _ Example: John Adams - SS # 000-00-5555 The new ID # will be ADA-5555 Prerequisite Certification Level - Check to indicate compliance with the certification prerequisite Check if applicable State of Connecticut Certified Fire Service Instructor II By my signature, I acknowledge that, per State Regulations. I have 12 months from the date of the Lead Instructor's signature on this application to complete all Certification Examination components Applicant Signature required for this Certification. WRITTEN EXAMINATION DATA Examination Date The Certification Unit must receive applications a minimum of 10 days prior to the requested examination date. Late applications will not be accepted or processed. **Examination Location** \$35.00 application fee required with application. Please check type of payment below: Check (please indicate check # and date) □ VISA □ MasterCard # _____ Security Code _____ Card Holder's Name: ___ Card Holder's Signature Expiration Date: ___ DO NOT SEND CASH By my signature below, I certify that the above information is true and correct to the best of my knowledge and that I will be at least 18 years of age on the date of the examination. I understand that intentionally making a false statement on this application will result in revocation of certification. Applicant's Signature Date

Remit completed application and fee to: Commission on Fire Prevention and Control

34 Perimeter Road

Windsor Locks, CT 06096-1069

NAME:					FFID#:	_ FFID#:	
FIRE SERVICE INSTRUCTOR III – NFPA Standard 1041 Compliance							
All objectives of NFPA Standard 1041, Fire Service Instructor III, must be addressed by an approved training methodology prior to acceptance into the certification testing process. Check off below the methodology utilized for this examination application:							
Practical Skills Evaluation Sheets							
Each candidate for Fire Service Instructor III Certification must be provided with, exposed to, and evaluated on all Fire Service Instructor III Practical Skills Evaluation Sheets in preparation for Certification Testing. The Candidate's initials in this section acknowledge receipt of a copy of all Fire Service Instructor III Skills Evaluation Sheets.							
I hereby acknowledge receipt of the Fire Service Instructor III Practical Skills Evaluation Sheets. Candidate Initials:							
Compliance Method 1 - Successful completion of the Connecticut Fire Academy Fire Service Instructor III training program							
	Compliance Method 2 - Proof of National Board on Fire Service Professional Qualifications, Inc. or International Fire Service Accreditation Congress Fire Service Instructor III accredited certification						
Compliance Method 3 - Examination Challenge – Director of Certification approval required							
The practical skills evaluation for NFPA 1041 Fire Service Instructor III is a project based assessment. The assessment shall not be completed by an evaluator directly involved in instruction of the program or the Lead Instructor.							
By signing below, I certify that I have evaluated the project submitted by this candidate and that the candidate has met or exceeded all requirements of NFPA 1041, Fire Service Instructor III based on the JPRs listed below and the associated Practical Skill Sheets.							
		6.2.3(A)					5(A)(B)
		6.2.7(A)			6.3.3(A)(B)		
		6.3.5(A)				5.7(A)(B)	
6.5.2(A)(B) 6.5 Evaluator Name Printed		6.5.3(A)				5.5(A)(B)	
Evaluator Name Printed			Evaluator Signature		Date		
Certification Use Only							
By signing below, I certify that this candidate graduated from a training program designed to meet or exceed the requirements of NFPA 1041 Chapter 6, 2012 edition, <i>Standard for Fire Service Instructor Professional Qualifications</i> , Fire Service Instructor III. This candidate has achieved satisfactory scores on all examinations, demonstrated proficiency in all skill evaluations identified for that level by having been observed and evaluated by a certified and qualified Fire Service Instructor in the accomplishment of these skills, per <i>Regulations of Connecticut State Agencies</i> , Section 7-323 <i>I</i> . I have reviewed all training records indicating dates and times of training and verified that this candidate is prepared for the certification process.							
Lead Instructor Printed Name							Telephone Number
Lead Instructor Signature						Date	