

Return Application to:

Kansas Fire & Rescue Training Institute

ATTN: Certification

1515 St. Andrews Drive

Lawrence, Kansas 66047-1625

E-mail: kufire@ku.edu

FAX: 785-864-9044

Personal Information

First Name	MI	Last Name	Suffix	Date of Birth (Month/Date/Year)	
Home Address			Home City	State	Zip Code
Home Phone ()		Work Phone ()		Mobile Phone ()	
Email Address			NFA/SID Number		
Fire Dept. or Organization			Fire Dept. or Organization Address		

Certification Category & Level

Please **CHECK ONLY ONE** the category/level of certification for which you are applying per registration form. For certification prerequisites, please refer to the KF&RTI web site (<http://kufire.ku.edu/firefighter-certification>).

- | | |
|---|--|
| <input type="checkbox"/> Fire Fighter I* (includes HazMat Awareness & Operations) | <input type="checkbox"/> Fire Fighter II* |
| <input type="checkbox"/> Driver/Operator-Aerial | <input type="checkbox"/> Driver/Operator-ARFF |
| <input type="checkbox"/> Driver/Operator-Pumper | <input type="checkbox"/> Driver/Operator-Pumper |
| <input type="checkbox"/> HazMat Awareness | <input type="checkbox"/> HazMat Operations* |
| <input type="checkbox"/> HazMat Technician* Fire | <input type="checkbox"/> HazMat Technician* Fire |
| <input type="checkbox"/> Fire Inspector I | <input type="checkbox"/> Fire Service Instructor I |
| <input type="checkbox"/> Fire Inspector II | <input type="checkbox"/> Service Instructor II |
| <input type="checkbox"/> Fire Officer I | <input type="checkbox"/> Fire Officer II |
| <input type="checkbox"/> Fire Officer II | <input type="checkbox"/> Airport Fire Fighter* |
| <input type="checkbox"/> Rope Rescue – Level I | <input type="checkbox"/> Rope Rescue – Level II |
| <input type="checkbox"/> Structural Collapse Rescue – Levels I&II* | <input type="checkbox"/> Structural Collapse Rescue – Levels I&II* |
| <input type="checkbox"/> Confined Space – Levels I&II* | |

* Indicates a level that requires verification of SCBA Fit Testing. See statement below.

Please contact KF&RTI at toll free at 866-804-8841 or refer to web site for the certification fee schedule.

Technical Rescuer (NFPA 1006, 2013 edition, Chapter 5)

Technical Rescuer – if you are registering for a Technical Rescuer test site (commonly known as “NFPA 1006, Chapter 5”) please complete the following portion. This information is required to take the qualification test. There is **NO FEE** for this test.

Select One: 1st Responder EMT Paramedic EMS Cert. No. Expiration Date:

Payment Method

Each application must be accompanied by payment of appropriate certification fees. Approved methods of payment are listed below. Please indicate the method of payment you will use. Please do not send cash.

Payment enclosed (check or money order) Bill my department or organization.

I wish to pay with a credit card. Please contact me for the information. My contact phone number is (include area code):

NO FEE. End-of-course test **ONLY** for one of the following courses:
 Fire Officer I
 Fire Officer II
 Inspector I
(No certification will be issued.)

Special Accommodation

If you need special accommodation, please check the box preceding this statement & you will be contacted by a staff member.

Applicant's Verification

I verify that I have reviewed the certification guidelines as stated in the Kansas Fire & Rescue Training Institute Certification Criteria and Procedures document and agree to conform to those guidelines. I further verify that all information submitted on this form is accurate.

Applicant's Signature _____

Verification Authority

I verify the person listed on this form has been fit tested as per OSHA 29 CFR Part 1910.134. This form must be signed by the person conducting the fit test, the Fire Chief, or the Authority Having Jurisdiction. (Required for: FFI, FFII, HM Ops, HM Tech, Airport FF.)

Signature of Verification Authority _____