HAZARDOUS MATERIALS TECHNICIAN
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. Both the instructor and candidate must complete this entire application prior to submission.

APPLICANT DATA

Last name       First name       MI
Home Street Address
Town                     State           Zip Code
Telephone
Home (                      Work (                      Cell (                      
Fire Department Name:
Fire Department City/Town:
Fire Fighter (Check One):
Career □ Volunteer □
Email Address:

ID Number __ __ __ - __ __ __ __  
Your ID consists of the first (3) letters of your last name and the last four (4) numbers of your social security 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

□ Individuals must be State of CT certified to the Fire Fighter I level or meet the respiratory standards of 29 CFR 1910.134 in the use of SCBA. Verification must be provided.
□ Proof of training to the Hazardous Materials Awareness and Operations level must be provided (if taken separately)

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 required for this Certification.
______________________________________________  Applicant Signature

EXAMINATION DATA

Type of Examination (Check One). (Applicants may apply for both types of examinations on a single application). 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.

Written Examination Date
Practical Examination Date
Examination Location
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

C07-12/18
HAZARDOUS MATERIALS TECHNICIAN – NFPA Standard 1072 Compliance

All objectives of NFPA Standard 1072, 2017 Edition, Chapter 7, “Hazardous Materials Technician”, 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


I hereby acknowledge receipt of the Hazardous Materials Technician Practical Skills Evaluation Sheets. Candidate Initials:

- Compliance Method 1 - Successful completion of a Connecticut Fire Academy Hazardous Materials Technician/Weapons of Mass Destruction training or other approved program
- Compliance Method 2 - Proof of National Board on Fire Service Professional Qualifications, Inc. or International Fire Service Accreditation Congress Hazardous Materials Technician accredited certification
- Compliance Method 3 – Examination Challenge – Director of Certification approval required

Hazardous Materials Technician - Practical Skills Compliance


Application Submittal Attachment Checklist

The following checklist is provided to assist the applicant to ensure that all required application attachments are provided. Failure to submit one or more of the following may result in an applicant being denied permission to participate in the examination process:

- Fire Fighter I Certification NFPA 1001, 2008 edition or newer, or Proof of compliance w/ respiratory Standards of 29 CFR 1910.134

By signing below, I certify that this candidate graduated from a training program designed to meet or exceed the requirements of NFPA 1072, Chapter 7, 2017 edition. 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 Regulations of Connecticut State Agencies, Section 7-323I. 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