



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

Firefighter I (No HMWMD) – NFPA 1001 Compliance Documentation for Connecticut Certification

Firefighter Name:

FFID#:

The Application process for Firefighter I Certification testing consists of two Sections:

Section A - Live Fire Suppression

Section B - Non-Live Fire Practical Skills Compliance and Evaluation

NOTE: Position task book will be reviewed during Practical Skills Testing

Practical Skills Evaluation Sheets

Each candidate for Firefighter I must be provided with, exposed to, and evaluated on all Firefighter I Practical Skills Evaluation Sheets in preparation for Certification Testing. The Candidate's initials in this section acknowledge receipt of a copy of all Firefighter I Skills Evaluation Sheets.

I hereby acknowledge receipt of the Firefighter I Practical Skills Evaluation Sheets.

Candidate initials:

Section A – Live Fire Suppression

Prior to certification at the Fire Fighter I level, each candidate must complete specific live fire suppression activities in accordance with the following NFPA 1001 objectives: 5.3.7, 5.3.8, 5.3.10, 5.3.16, and 5.3.19. These activities must be verified on a **separate, "Firefighter I Certification Live Fire Suppression Verification Form"**.

Section B - Non-Live Fire Practical Skills Compliance and Evaluation

Training Program Completion

All objectives of NFPA Standard 1001, Chapter 4 must be addressed by an approved training methodology prior to acceptance into the certification testing process. Check methodology used below:

- Compliance Method 1** – Successful completion of a Connecticut Regional Fire Training School Firefighter I training program
- Compliance Method 2** – Proof of National Board on Fire Service Professional Qualifications, Inc. or International Fire Service Accreditation Congress Firefighter I accredited certification
- Compliance Method 3** – Fire department training program or educational programs (Prior CFPC approval required)
- Compliance Method 4** – Challenge process. Director of Certification approve required

Training Program Location _____ Date program completed _____

By signing below, I certify that this candidate is a graduate of a training program designed to meet or exceed the requirements of NFPA 1001, Chapter 5, 2019 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

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
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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 17 years of age on the date of the *Practical Skills or Written* examination. Certification of those under the age of 18 will be held until reaching the age of 18. I understand that intentionally making a false statement on this application will result in revocation of certification.

Date of Birth for Applicants under 18 years of Age. Proof must be Submitted with this Document	Birth Date
Applicant's Signature	Date

