

LIVE FIRE SUPPRESSION VERIFICATION FORM

FIRE FIGHTER I, FIRE FIGHTER II, FIRE FIGHTER I/II CERTIFICATION

This Live Fire Suppression Verification Form, fully and accurately completed, shall be administered as part of the CFPC Certification process to indicate the Certification Candidate has met the Job Performance Requirements (JPRs) for the specified objectives for NFPA 1001, *Standard for Fire Fighter Professional Qualifications, 2019 Edition*. (Refer to reverse side of form for JPR listing).

(Please Print Legibly):

Last Name	First Name	MI
Name of Fire Department		
FFID Number _____ - _____	Your FFID consists of the first (4) letters of your last name, the first letter of your first name AND the last four (4) numbers of your Social Security Number. Example: John Adams – SS # 000-00-5555. The new FFID# will be ADAMJ-5555	

INSTRUCTIONS: Complete the appropriate section(s) below based on the Certification Candidate’s intended level of training and certification. Complete both sections for Fire Fighter I/II certification.

Fire Fighter I

Objective #	Job Performance Requirement	Auditor’s Initials	Date
JPR# 4.3.10	Interior Structural Fire Attack - SS# FF1 Interior Attack, Nozzle, Ops		

Fire Fighter I Local Verification

The Certification Candidate must complete one or more of the following Live Fire Suppression Evolutions.

Objective #	Job Performance Requirement	Instructor Initials	Date
JPR# 4.3.7	Passenger Vehicle Fire Attack – SS# FF1 Car Fire		
JPR# 4.3.8	Exterior Class A Fire Attack - SS# FF1 Fire Attack Class A		
JPR# 4.3.16	Portable Fire Extinguisher Suppression - SS# FF1 Portable Exting.		
JPR# 4.3.19	Ground Cover Fire Attack - SS# FF1 Ground Cover Fire		

Fire Fighter II Local Verification

The Instructor is responsible for signing off on FF2 Interior Fire Attack

Objective #	Job Performance Requirement	Instructor’s Initials	Date
JPR# 5.3.2	Coordination of Interior Fire Attack - SS# FF2 Fire Attack		

The Certification Candidate must complete one or more of the following Live Fire Suppression Evolutions.

Objective #	Job Performance Requirement	Instructor Initials	Date
JPR# 5.3.1	Ignitable Liquid Fire Extinguishment with Foam - SS# FF2 Foam		
JPR# 5.3.3	Flammable Gas Cylinder Fire Control - SS# FF2 Flammable Gas Fire		

This form is NOT valid without the signature of the Department Fire Chief or Designee or Director of the Regional School or Agency.

Affirmation of Signers: This is to attest that the Certification Candidate named above has successfully completed all Job Performance Requirements (JPRs) for each respective Live Fire Suppression Evolution, during formal training conducted in accordance with NFPA 1403, *Live Fire Training Evolutions, 2018 edition*. (Refer to reverse side of form for JPR listing).

Department Fire Chief or Designee or Director of Regional Fire School or Agency

Print Name	Signature	Date
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