



IDAHO  
**FIRE SERVICE TRAINING**

# Certification Application

## FIREFIGHTER I

Recommended study materials for the Firefighter I written exam:

- IFSTA Essentials of Firefighting, 7<sup>th</sup> ed.

**EACH APPLICANT IS RESPONSIBLE FOR BRINGING NFPA-APPROVED TURNOUT GEAR, INCLUDING HELMET, COAT, PANTS, BOOTS, GLOVES, AND SCBA FOR FIREFIGHTER I MANIPULATIVE SKILLS TESTING.**

LAST NAME		FIRST NAME			MIDDLE INITIAL	
SSN		DATE OF BIRTH		EMAIL		
WORK PHONE		HOME PHONE		CELL PHONE		
MAILING ADDRESS		CITY		STATE	ZIP	COUNTY
FIRE DEPARTMENT AFFILIATION						
FIRE DEPARTMENT ADDRESS			CITY		STATE	ZIP
WRITTEN TEST DATE REQUESTED	LOCATION			INITIAL TEST <input type="checkbox"/>	RETEST <input type="checkbox"/>	
SKILLS TEST DATE REQUESTED	LOCATION			INITIAL TEST <input type="checkbox"/>	RETEST <input type="checkbox"/>	

I certify that the applicant has satisfactorily demonstrated the knowledge and skills in the required competencies for Firefighter I and NFPA 1001, 2019 edition, Standard for Firefighter Professional Qualifications. In addition, the applicant meets the competencies of NFPA 472, 2017 edition, Standard for Competence of Responders to Hazardous Materials Awareness and Operations Level. I also certify that the applicant meets the medical and physical fitness requirements required by my department to perform firefighter duties.

CHIEF'S NAME (PLEASE PRINT)

CHIEF'S SIGNATURE

DATE

Check the box if you need testing accommodations and download and [fill out a testing accommodation form](#). All requests for accommodations are confidential and will not be made available to anyone outside of FST.

The information contained in this application is correct to the best of my knowledge. I understand and agree that any false statements or omissions of material facts will cause denial or forfeiture of my certification. I grant Fire Service Training (FST) or its authorized representatives permission to review my department files, college/academic records, and other related training documentation.

APPLICANT'S SIGNATURE

DATE

Fax the completed form to 208-429-5559 or email it to [fst@cte.idaho.gov](mailto:fst@cte.idaho.gov).



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FIREFIGHTER I LOCAL VERIFICATION

NFPA 1001, 2019 edition: Chapter 6

APPLICANT'S NAME	SSN
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Objective 4.3

The applicant must have completed the emergency medical care performance capabilities listed below to meet the objectives of NFPA 1001, 2019 edition. These requirements must be developed and validated at the local level.

Documentation of the requirements contained below is subject to verification by Fire Service Training.

The applicant identified above has met minimum emergency medical care requirements, including CPR, Infection Control, Bleeding Control, and Shock Management.

<b>Affirmation</b>			
I have reviewed the applicant's file and certify that the applicant identified above has met the medical requirements. Local department records can document all information listed above.			
FIRE DEPARTMENT	<input type="text"/>		
CHIEF'S NAME (PLEASE PRINT)	<input type="text"/>		
CHIEF'S SIGNATURE	<input type="text"/>	DATE	<input type="text"/>
APPLICANT'S SIGNATURE	<input type="text"/>	DATE	<input type="text"/>

<b>Release of information</b>			
I authorize release of certification exam results to: _____			
APPLICANT'S SIGNATURE	<input type="text"/>	DATE	<input type="text"/>



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**FIREFIGHTER I**

**Live Fire Training**

**APPLICANTS: THIS COURSE COMPLETION FORM MUST BE FILLED OUT AND ATTACHED TO YOUR APPLICATION.**

I certify that _____ (APPLICANT) has successfully completed a Basic Structural Fire Attack Concept and Tactics course or an equivalent live fire training class..			
TRAINING DATE	<input type="text"/>	TRAINING LOCATION	<input type="text"/>
LEAD INSTRUCTOR NAME (PLEASE PRINT)	<input type="text"/>		
LEAD INSTRUCTOR SIGNATURE	<input type="text"/>	DATE	<input type="text"/>
APPLICANT'S SIGNATURE	<input type="text"/>	DATE	<input type="text"/>

**LEAD INSTRUCTOR: Sign this form and provide a copy to the applicant.**

**Reminder**

Applicants are required to have completed a basic Firefighter I course per NFPA 1403, 2018 edition, 4.3.1 and 4.3.2, before admittance to the live fire course is allowed. An applicant may participate in a live fire course without having passed the Firefighter I written exam.