

FIREFIGHTER APPLICATION

We are now accepting applications for the next Firefighter course. The course will be scheduled according to need and will be held at the Public Safety Campus, located at 3640 Gaines Road, St. Augustine, Florida. We offer both full-time day and part-time evening classes for your convenience.

In order to be eligible for this class, you must meet the following prerequisites and complete the steps listed in the Enrollment Process below.

PREREQUISITES:

1. High School Diploma, GED or Higher Degree
2. Must be at least 18 years of age
3. Must have completed either a First Responder Course, EMT-B, OR Paramedic Training course.
4. Be a nonuser of tobacco or tobacco products for at least 1 year immediately preceding application
5. Complete Medical Examination thorough the Physician of your choice (MUST use form attached)
6. All documents listed on the Application Checklist must be submitted prior to the application deadline.
7. Successfully pass the Physical Agility Assessment Evaluation and attend Mandatory Orientation.

**NOTE: The medical examination must be completed no more than 6 months prior to start date of the Firefighter I class. The Medical Exam Form must be returned prior to participation in the Physical Agility Assessment Evaluation.*

IF you meet the above requirements, please continue with this Firefighter Application Checklist

- Complete the Firefighter ONLY Application** and attach a copy of all required documents
 - Firefighter Application
 - High School Diploma, GED or Higher Degree
 - Valid Driver's License
 - EMT/ Paramedic or First Responder Certificate
 - Medical Examination Form (attached)
 - Tobacco Affidavit
 - Register for Physical Agility Exam \$50.00
 - Application Fee \$10.00

- Go to your program on **FCTC.edu** and click on **Create My FCTC Account** to start your pre-registration

- Submit payment for testing and application fees to the Registration Department, 2980 Collins Ave. Bldg A.

- Submit completed application packet to the Public Safety Campus, 3640 Gaines. Rd

ENROLLMENT PROCESS

ACCEPTANCE INTO THE PROGRAM

Once you have completed the application process by providing all required documents, and have successfully completed the entrance agility test, you will be invited to attend orientation. Students will be accepted into the program on a first come, first served bases. Once the roster has been filled, students will be offered a seat in the next available class.

ORIENTATION

Attendance at the Orientation is mandatory in order for you to be considered for the program and will be held approximately two to four weeks before classes begin. You must pass the agility test and attend orientation before you will be allowed to register for the course. If you are unable to attend orientation, your application will be re-evaluated with the next pool of applicants. After your second opportunity, your application will be deactivated, and you will have to reapply

AUXILIARY AID

This school provides auxiliary aids and services for persons with disabilities. If you need assistance during the course of your study, please contact your Student Advisor in Building A or ftcstudentservices@stjohns.k12.fl.us

FINANCIAL AID

The Firefighter only program does not qualify for financial aid.

COURSE DESCRIPTION

The Firefighter Training and Certification Program meets all state requirements to become a State Certified Firefighter. Upon successful completion of the training program, and passing the State written and practical exams, you will be eligible for a Certificate of Compliance provided you meet all legal requirements as outlined in Florida Statue 633.34. A Certificate of Compliance is the required Certification to work in Florida as a paid Firefighter.

This course requires a commitment from the student both physically and mentally to reach the high standards that are required to pass the State exams. Written exams and practical evaluations follow each unit of study.

ATTENDANCE

Strict attendance records are maintained, as required by the Bureau of Fire Standards and Training (BFST). The BFST requires that the training center certify that each applicant for Firefighter II certification testing has completed a minimum of 398 hours of overall training. The training center must also verify that each applicant has met the minimum requirements for hours of training in specific subject areas.

Attendance is mandatory.

GRADES

A minimum score of 70% is required to pass all tests. An overall average of 70% or better is required at the end of the course for you to be eligible to take the State examination. Specific details for retaking exams will be given to you in the student handbook that is distributed in class.

PHYSICAL AGILITY ASSESSMENT EVALUATION (Be sure you register/pay for this test \$50.00)

Each applicant must successfully pass a two-part Physical Agility Assessment Evaluation prior to admittance into the program. This evaluation will be administered prior to Orientation. Applicants will be notified of date(s) and time of evaluation by e-mail. The following items summarize the requirements for this evaluation. Failure of any evolution will result in denial of admission into the program. No second attempts will be allowed on any of the events listed below. The candidate should dress in athletic clothing (long pants; T-shirt, and tennis shoes). No shorts allowed!

PART A: Aerobic Capacity Test: Walk 2 miles while wearing a Self-Contained Breathing Apparatus within 30 minutes or less.

PART B: On-Target Combat Task Test: Must be completed within 7 minutes or less while wearing a SCBA.

1. High-Rise Stair Climb-Ascend the exterior stairwell to the 5th floor while carrying a section of 2 ½" hose
2. Hose Hoist- Hoist a roll of 2 ½" hose to the 5th floor window and pull the hose into the window.
3. Forcible Entry Evolution- Drive a slide 5' utilizing a 12 pound sledge hammer.
4. Hose Advance Evolution- Drag a charged 1 ¾" hose a total of 75'.
5. Victim Rescue Evolution- Drag a 125 pound victim a total of 100' while walking backwards.

Course Length

Fire Fighter I/II - Day Total: 398 Hours / 10 Weeks / 2.5 Months

Fire Fighter I/II Night Total: 398 Hours / 20 Weeks / 5 Months

TABE Not Required

Program Fees

Prior to Program Start

Physical Exam: \$ 150.00 *Approximate Fees Individual insurance/physician varies**

Application Fee \$10.00

Physical Agility Exam Fee: \$50.00

After Orientation/Acceptance: Before the 1st day of class

Bunker Gear Rental: \$650.00

Fingerprinting Background Check: \$60.00

State Fire Marshall Application and Testing Fee: \$30

Attention

READ BEFORE APPLYING

Florida Statutes have specific requirements for Firefighter Certification. We suggest you review the statute below to make sure you will be able to obtain certification before deciding to apply.

633.412 Firefighters; qualifications for certification.—

(1) A person applying for certification as a firefighter must:

(a) **Be a high school graduate** or the equivalent, as the term may be determined by the division, and at least 18 years of age.

(b) **Not have been convicted of a misdemeanor** relating to the certification or to perjury or false statements, **or a felony** or a crime punishable by imprisonment of 1 year or more under the law of the United States or of any state thereof or under the law of any other country, **or dishonorably discharged from any of the Armed Forces** of the United States. “Convicted” means a finding of guilt or the acceptance of a plea of guilty or nolo contendere, in any federal or state court or a court in any other country, without regard to whether a judgment of conviction has been entered by the court having jurisdiction of the case.

(c) **Submit a set of fingerprints** to the division with a current processing fee. The fingerprints will be forwarded to the Department of Law Enforcement for state processing and forwarded by the Department of Law Enforcement to the Federal Bureau of Investigation for national processing.

(d) **Have a good moral character** as determined by investigation under procedure established by the division.

(e) **Be in good physical condition** as determined by a medical examination given by a physician, surgeon, or physician assistant licensed to practice in the state pursuant to chapter 458; an osteopathic physician, surgeon, or physician assistant licensed to practice in the state pursuant to chapter 459; or an advanced registered nurse practitioner licensed to practice in the state pursuant to chapter 464. Such examination may include, but need not be limited to, the National Fire Protection Association Standard 1582. A medical examination evidencing good physical condition shall be submitted to the division, on a form as provided by rule, before an individual is eligible for admission into a course under s.

633.408.

(f) **Be a nonuser of tobacco** or tobacco products for at least 1 year immediately preceding application, as evidenced by the sworn affidavit of the applicant.



FCTC USE ONLY:
FOCUS ID _____
DATE _____
Initials _____

Fire Fighter Application

All fees are non-refundable, non-transferable and subject to change
The application fee is \$10.00

Firefighter I & II

Day Class Starting Date: _____

Evening Class Starting Date: _____

*Firefighter II ONLY Starting Date: _____

Name _____

_____ Last First Full Middle Maiden/Other Names

Address _____

_____ Street Apt/Unit Number City

County State Zip

Home Phone _____ Work _____ Cell _____

Email _____

Emergency Contact _____ Phone Number _____

*Highest Level of Emergency Certification:

Medical First Responder EMT Paramedic

Are you affiliated with a Fire Department? Yes No

If yes, Give department name: _____

Department contact person: _____ Phone: _____

List any current or previous Fire Service or Medical Training:

*Please provide proof of Medical Certification or proof that you are either registered or attending a medical course.

Have you ever been convicted of a crime, found guilty or entered a plea of no-contest to a crime other than a traffic violation? Yes No

If yes, please explain

I have been provided the consumer information notice at <http://fctc.edu/consumer/gainful-employment/> and campus security report on the FCTC website at <http://fctc.edu/about/safety/> . FCTC will also provide a paper copy of the campus security report upon student request. FCTC Student Handbook is located <http://fctc.edu/students/handbook/> .

I verify that all information contained in this application is true and correct. I authorize First Coast Technical College to contact former employers and educational institutions listed in this application, and further authorize these employers and educational institutions to release information to officials of First Coast Technical College concerning my performance and progress while under their employ or enrolled in their program(s).

Signature of Applicant Date



THE DEPARTMENT OF FINANCIAL SERVICES

Division of the State Fire Marshal

**MEDICAL EXAMINATION TO DETERMINE FITNESS FOR FIREFIGHTER TRAINING
BUREAU OF FIRE STANDARDS AND TRAINING**

Please print legibly.

NAME: LAST	FIRST	MI	STUDENT ID
TRAINING CENTER	EMAIL ADDRESS		CONTACT PHONE NUMBER

For the medical professional conducting the examination: The purpose of this examination is to ensure that the physical, physiological, intellectual, and psychological health of the applicant is suitable for the environment and functions of a firefighter as described on page 2. Authority for this examination is FS 633.34 and is required before an individual starts firefighter training.

This medical examination must be completed by a physician, surgeon, or physician's assistant per ch. 458; or an osteopathic physician, surgeon, or physician's assistant per ch.459; or an advanced registered nurse practitioner per ch. 464.

Examination should include but is not limited to:

Dermatological system, Cardiovascular system	Ears, eyes, nose, mouth, throat
Clinical evaluation of 12 lead EKG	Auditory hearing in the pure tone
Systolic and Diastolic Blood pressure	Far visual acuity corrected or uncorrected
Respiratory system	Peripheral vision
Gastrointestinal system	Genitourinary system
Endocrine and metabolic systems	Musculoskeletal system
Neurological system	

For the medical professional conducting the examination to complete: (Sign in appropriate box)

Based on the results of this medical evaluation, the applicant:

<p>Has no pre-existing or current condition, illness, injury or deficiencies. <u>The applicant is medically fit to engage in firefighter training.</u></p> <p>Signature</p>	<p>Has a pre-existing or current condition, illness, injury or deficiency that presents a safety or health risk in the environment or job functions of a firefighter. <u>The applicant is not medically fit for firefighter training.</u></p> <p>Signature</p>
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Completion Required (please print)

Name of signature: _____ Date signed: _____

Office Telephone number: _____

Office address: _____

DFS-K4-1022 Original Effective Date 9/07/81, Amended Date 01/01/09

Essential Job Tasks and Descriptions from NFPA 1582, 2007 edition

1. Performing firefighting tasks (e.g., hose line operations, extensive crawling, lifting, carrying heavy objects, ventilating roofs or walls using power or hand tools, and forcible entry), rescue operations and other emergency response actions under stressful conditions while wearing personal protective ensembles and self-contained breathing apparatus (SCBA), including working in extremely hot or cold environments for prolonged time periods.
2. Wearing an SCBA, which includes a demand valve–type positive-pressure face piece or HEPA filter masks, which requires the ability to tolerate increased respiratory workloads.
3. Exposure to toxic fumes, irritants, particulates, biological (infectious) and nonbiological hazards, and/or heated gases, despite the use of personal protective ensembles and SCBA.
4. Climbing six or more flights of stairs while wearing fire protective ensemble weighing at least 50 lbs. or more and carrying equipment/tools weighing an additional 20 to 40 lbs.
5. Wearing fire protective ensemble that is encapsulating and insulated, which will result in significant fluid loss that frequently progresses to clinical dehydration and can elevate core temperature to levels exceeding 102.2°F (39°C).
6. Searching, finding, and rescue-dragging or carrying victims ranging from newborns up to adults weighing over 200 lbs. to safety despite hazardous conditions and low visibility.
7. Advancing water-filled 2 ½ diameter hose lines from fire apparatus to occupancy [approximately 150 ft.], which can involve negotiating multiple flights of stairs, ladders, and other obstacles.
8. Climbing ladders, operating from heights, walking or crawling in the dark along narrow and uneven surfaces, and operating in proximity to electrical power lines and/or other hazards.
9. Unpredictable emergency requirements for prolonged periods of extreme physical exertion without benefit of warm-up, scheduled rest periods, meals, access to medication(s), or hydration.
10. Operating fire apparatus or other vehicles in an emergency mode with emergency lights and sirens.
11. Critical, time-sensitive, complex problem solving during physical exertion in stressful, hazardous environments, including hot, dark, tightly enclosed spaces, that is further aggravated by fatigue, flashing lights, sirens, and other distractions.
12. Ability to give and comprehend verbal orders while wearing personal protective ensembles and SCBA under conditions of high background noise, poor visibility, and drenching from hose lines and/or fixed protection systems (sprinklers), hear alarm signals, hear and locate the source of calls for assistance from victims or other firefighters.
13. Functioning as an integral component of a team, where sudden incapacitation of a member can result in mission failure or in risk of injury or death to civilians or other team members.

DFS-K4-1022 DFS-K4-1022 Original Effective Date 9/07/81, Amended Date 01/01/09

TOBACCO AFFIDAVIT

Florida State Statute 633.412 Firefighters; qualifications for certification states:

- (1) A person applying for certification as a firefighter must:
 (f) Be a nonuser of tobacco or tobacco products for at least 1 year immediately preceding application, as evidenced by the sworn affidavit of the applicant.

<i>Please type or print legibly.</i>			
NAME: LAST	FIRST	MI	DATE OF BIRTH
HOME ADDRESS:	CITY	STATE	ZIP CODE
E-MAIL ADDRESS	CONTACT PHONE NUMBER		

I confirm I have been a nonuser of tobacco or tobacco products for at least one year immediately preceding application as required by Florida State Statute 633.412.

SIGNATURE **DATE**

NOTARIZED

STATE OF FLORIDA
 COUNTY OF _____

On _____, _____, _____ personally
 (month and day) (year) (Applicant's Name)
 appeared before me and, _____ who is personally known to me, or _____ who has provided
 _____ as identification.

 Notary Public Signature
 Commission expires: _____

PLEASE AFFIX SEAL ABOVE