



Fire Fighter / EMT – Combined

Application

Thank you for your interest in attending First Coast Technical College. This application packet is for those persons who are applying for the combination Firefighter and EMT training program.

FCTC is certified as a firefighter training center by the Florida Bureau of Fire Standards and Training, and by the Florida Department of Health as an Emergency Medical Technician (EMT) and Paramedic training center. This program provides the training required to become certified as a Firefighter II and an EMT in the State of Florida. Graduates may also obtain NREMT certification as an EMT, and Pro Board certification as a firefighter.

The firefighter portion of the program includes 398 hours of training and hands on activities, including live fire training. The EMT portion is 300 hours, and includes extensive hands on training on campus, as well as 20 hours working in a local hospital emergency department, and a minimum of 30 hours working as an intern on a local rescue unit (ambulance).

Entrance Requirements:

- Applicants must be 18 years old to enter the program. (This program is not available as a secondary or dual enrollment program.)
- High School Diploma or GED
- Comply with the background check requirements of Florida Statute Sections (FSS) 408.809, 633.107, 633.214, and Florida Administrative Code section 64J-1.017.
- Must not be a convicted or registered sex offender.
- Be free of any addiction to alcohol or any controlled substance (FSS 401.27 (4)(a)(2)).
- Be a non-user of tobacco for at least one year prior to enrollment (FSS 633.412 (f)).
- Must be medically and physically able to perform the duties of a FF / EMT, and must be free of infectious diseases that would pose a hazard to patients. (This shall be demonstrated by submission of the two medical clearance forms, drug screening results, vaccination records, TB test results, and passing the Physical Ability Assessment.)
- Meet any general FCTC admission requirements.
- Have a CPR certification that will be valid through the end of the program (this certification course is available from FCTC).

This application packet is intended to be self-explanatory. Please read the whole packet before starting.

Are you not sure you want this program, and need more information? Contact Ronnette Waycaster at 904-547-3542, or our receptionist at 904-547-3282, extension 4401. They will be happy to setup an appointment for you with the enrollment specialist or the program specialist.

Please note: FCTC is currently updating and improving the enrollment process, there may be changes to the following procedures that will affect your registration process. Check back on our website for updates.

Are you ready to apply right now? Then follow the process outlined below:

Submit a general First Coast Technical College Pre-Registration application via our online website:

<https://fctc.focusschoolsoftware.com/focus/apply/> Use **Mozilla Firefox** or **Google Chrome** web browser software to access this website, it may not work correctly with Internet Explorer or other browsers!

If you are sure of the program you wish to enroll in, please complete the full application, and click the “Finish and Submit” button at the bottom of the form. If you are unsure how to answer any of the questions on the application, leave them blank. The registration staff will complete any missing information when you formally register for the program. (You should expect to hear from us, usually via email, shortly after you submit the online application. Please include a valid email address on your application, and check it on a regular basis.)

If you have ever been a student here before, you already have a “FOCUS” user account set up. Contact program staff at 904-547-3542, or 904-547-3400 to obtain your user name and password.

Create a user account and profile on the State Fire Marshal’s website: The State Fire Marshal’s Office is the certifying agency for firefighters in the state of Florida. All firefighter training and certification records are maintained in this online system. If one does not already exist for you, you will need to create a user account and setup your profile in the system. Go to the following website and follow the prompts: https://floridastatefirecollege.org/public/pb_check_profile_srch.asp Use **“Internet Explorer”** only to access this website, it will not display all menus properly if you use another browser. Most users will get a security notice indicating that there is a problem with the website’s security certificate. If so, please select the “Continue to this website” option. Make sure you note the user name and password you have created. This needs to be done before you submit your application packet.

When you are creating your profile, it will ask you what type of firefighter you are, please just select “Other” if none of the choices fit. It also asks what your primary and secondary occupation is, since you will be a student and that is not one of the choices, just choose “Other” for the first selection, and “EMT” if a second choice is required. You should just leave the “Business Name and Address” section blank.

Once you have successfully created your user account and profile, please log out and then log back in to the system. You should then see a top line menu, select the “Customize” option and then the “My Profile” option. You will see your Student Id: number in the upper right hand corner, and about half way down under “Contact Information”. It will usually be a six digit number. Please make a note of this

number, commonly referred to as your “FCDICE” number. You will need to enter this number on your FCTC application.

Wonderlic Scholastic Level Exam: Schedule and complete the “Wonderlic Scholastic Level Exam” to determine if you meet minimum entrance requirements. Wonderlic testing is still being setup, and will probably be available by late July. Please check back for information about how to register for that assessment. (If you do not meet the minimum requirement on the Wonderlic assessment, contact a student advisor about remediation assistance available to get you ready for program entrance.) Here is one website with general information about the exam: <http://www.wonderlictestprep.com/scholastic-level-exam-sle>

PROGRAM APPLICATION PACKET:

If you have obtained the minimum required score on the Wonderlic Scholastic Level Exam, your next step is to submit the program specific application, with all required documents. NOTE: We will no longer accept partial or incomplete applications. Applicants are expected to submit a complete application, with all required documents, by the due date.

We strongly suggest that you make and maintain a file with copies of all the documents you submit to us. Many of these documents will also be required when you apply for work as a firefighter or EMT. Some of the documents we receive will be forwarded to state agencies as a part of your certification application, and will not be retained by FCTC.

Required documents include:

Application cover sheet: self-explanatory

Application checklist: Please initial each item that you have attached.

Copy of high school diploma, official transcript, or GED: A copy of either of these is adequate for our program files, and a copy must be attached to the firefighter state test application that we will submit on your behalf. However, FCTC may also require an official sealed transcript to determine if you are TABE exempt. We suggest you request an official sealed transcript be sent to FCTC at the address below:

First Coast Technical College
Attn. Registration
2980 Collins Avenue
St. Augustine, FL 32084

Copy of a valid driver’s license: This is required as proof of age, and a copy must also be submitted with your state firefighter test application.

“Medical Examination to Determine Fitness for Firefighter Training” form (DFS-K4-1022): Per state rules, this form must be dated not more than six months before the first day of your firefighter program to be valid. Please determine the start date of the course you wish to enroll in before getting this done. This form is required of all persons who will apply for firefighter certification in the state of Florida. FCTC also requires this form as a pre-requisite to taking our Physical Ability Assessment for entrance into the

firefighter program. We suggest that you get this and the “Health Certificate” form completed at the same time.

The “student ID” on this form is the student ID number the State Fire Marshal’s Office issues you in the “FCDICE” system. Leave blank if you are not sure. The training center will be “FCTC”. Make sure your physician signs in the correct block, and not where they ask for a printed name. The physician must sign both pages, to verify that they have read and understood the activities they are clearing you to perform.

Health Certificate – Emergency Medical Services Programs form: This form must be completed and signed by both the applicant and a health care professional. We must have this form on file for all students who participate in hospital clinical work or rescue unit internships. You may use any qualified clinic, doctor, nurse practitioner, or physician’s assistant of your choice to perform the exam and sign off. You should remember to get this form and the DFS-K4-1022 form signed off at the same time. You may find it helpful to collect your vaccinations records first, and take them with you to the exam. The medical professional should be able to start or complete any needed vaccinations, or perform titer tests to verify immunity. You may also need your medical professional to order the drug screening and TB testing.

NOTE: We need the two forms above, and proof of vaccinations and TB testing. Do NOT submit any other part of your medical exam records, such as EKG printouts, medical questionnaires, or detailed history and physical exam narratives. If you do, they will just be returned to you.

How do I get my vaccination records? – many of you ask how you can get copies of your vaccination records. Please be advised that many high school transcripts also contain records of certain vaccinations, including MMR, Hepatitis B, and Tetanus / Diphtheria. We will accept such records as proof of vaccinations. In other cases, you may be able to get vaccinations from your county or state health department. Military records of vaccinations or immunity are also acceptable. Use this link for more information about Centers for Disease Control (CDC) vaccination recommendations for Healthcare Personnel: <http://immunize.org/catg.d/p2017.pdf>

Proof of tetanus / diphtheria vaccination: You must provide proof that you have had a tetanus / diphtheria vaccination that will be less than ten years old on the last day of your program.

Proof of MMR vaccination: You must have proof that you have received two vaccinations for Measles, Mumps, and Rubella (MMR) in your lifetime. If you have never had the vaccinations, you must have at least the first one completed before the program starts, and the second one 28 days after the first one. If you believe you have had the vaccinations, but do not have a record, your health care professional may be able to order a “titer” test, a titer test result that verifies you have immunity is also acceptable.

Proof of Hepatitis B vaccination: You must have proof of having received the full three shot series of Hepatitis B vaccinations, or stated the series and get the second and third shots as recommended, or have proof of immunity (titer test results).

Proof of “current” flu vaccination: EMT and paramedic students must have a “current” flu vaccination whenever they are participating in hospital or field internship during flu season (October through March). Since the strains of flu virus expected to affect the United States varies each year, last year’s flu

vaccine is not adequate to protect against the current year threat. You will need to submit proof of receiving the 2017-2018 flu vaccine, which may not be available until late summer or early fall. Your application will not be considered incomplete if the vaccine is not yet available.

TB skin test or chest x-ray results: All health program students must have a current TB test for the duration of their program. The skin test involves a small shot under your skin, with the health care professional “reading” the results by examining the area after two days. If the result is positive, you will have to have a chest x-ray to verify that you are free of TB. This should usually be done at the same time as your medical exam. Please make sure to ask for it. The test must be less than one year old on the last day of your scheduled program, so don’t do this too far ahead of time!

Drug screen results: You must have a drug screening, with the results mailed or faxed directly to us. The screening must be at least an “8 panel” screening. Your medical professional can write the order that is required by many labs before they will perform the test. The drug screening must be performed within six months of the first day of your program. Results should be mailed or faxed to:

Attn. Ronnette Waycaster, Public Safety Programs
First Coast Technical College
2980 Collins Avenue
St. Augustine, FL 32084
Fax number 904-679-3551

FDLE background check results: You will request the background check yourself. The check must be performed within six months of the first day of your program. Using a credit card, go online to the Florida Department of Law Enforcement at: <https://web.fdle.state.fl.us/search/app/default> (cost is \$24.00) Follow the directions, and attach the results to your application. Be sure to print and attached the **RESULTS** – not the receipt.

If you have ever had a felony arrest or dishonorable discharge, you are encouraged to review the following statutes before applying to the program:

<http://m.flsenate.gov/Statutes/633.412>
<http://m.flsenate.gov/Statutes/633.107>

Tobacco affidavit: A signed and notarized tobacco affidavit form must be submitted. This document will become part of your state firefighter test application. A notary is usually available at the Main Campus and the Public Safety Campus. They will be happy to notarize this document for you at no charge.

Register for the Physical Ability Assessment Evaluation: Contact registration at 904-547-3282, or at 904-547-3542, and register for the assessment. You must pay the \$50 fee at the time of test registration. You must test on the date scheduled for your program start date. You may not test “early” for a later class start date. If you withdraw or choose to apply for a later class start date, you will have to repeat this assessment each time. You are encouraged to prepare yourself physically for the program. To help you do so, here is a link to a YouTube video clip demonstrating the ability evaluation process:
<http://www.youtube.com/watch?v=TnVkEGMtbTs&feature=youtu.be>

General Information / Frequently asked questions.

APPLICATION REVIEWS AND PROGRAM COMMUNICATIONS

Many of you will submit your application packets early. You are encouraged to do so. However, please be advised that program staff will usually not be able to review each application individually as they are received. Program staff will typically review all applications shortly after the application deadline. At that point, you should receive an email letting you know if any items are still missing, or if there are other issues with your application. That is also when you should expect an email with more details about the ability test and orientation days. Please be patient with us.

Please make sure you provided us with a legible / valid email address, and that you check it regularly. Most of the communication we have with applicants will be via email.

You are encouraged to supply us with a personal email address, rather than use a family or parent's email address. If you need to create your own account, see the following link for possible free email account services: <https://www.thebalance.com/best-free-email-accounts-1356641> Once you create an email account with most of these services, you can access your new email account from any computer or smartphone connected to the internet.

ACCEPTANCE INTO THE PROGRAM

THIS PROGRAM REQUIRES CLOSE CONTACT WITH CHILDREN. PURSUANT TO FCTC'S POLICIES, CONVICTED AND/OR REGISTERED SEXUAL OFFENDERS WILL NOT BE ADMITTED TO THIS PROGRAM.

Applicants without a minimum score of **(TBD)** on the Wonderlic assessment, and/or who do not pass the Physical Ability Assessment, will not be accepted into the program. Applicants who have a felony or dishonorable discharge, and have not yet received a required exemption / waiver from the State Fire Marshal's Bureau of Fire Standards and Training will not be accepted. To obtain information about the felony exemption process, please contact the Bureau of Fire Standards and Training directly at FireCollegeStandards@MyFloridaCFO.com . Applicants with criminal records that do not meet Florida Department of Health standards for certification as an EMT will not be accepted.

Once the application deadline has passed, all candidates with fully completed applications on file will receive a notice inviting them to participate in the ability test and orientation. Should there be a very large number of applicants, the college reserves the right to invite a limited number of applicants, prioritized based on the date their Pre-Registration Application was completed. Applicants with incomplete applications may be invited to attend the ability test / orientation date, but may not be accepted until their application is complete.

Applicants who have met all program criteria for entry, including passing Wonderlic scores and Physical Ability Assessment scores, will be notified on the day of their ability assessment if they have been accepted into the program. If there are more applicants than seats available, some applicants may

be placed on the alternate / wait list. Candidates with incomplete applications may have their formal acceptance delayed until the program staff determine that the application packet meets minimum requirements for program start.

Applicants who fail to complete the registration process within one week after the orientation date may have their seat transferred to an applicant on the wait list. Alternatively, FCTC reserves the right to cancel a scheduled program if a minimum number of students have not registered within the one week period.

ORIENTATION

Attendance at the Orientation is mandatory for you to be considered for the program and will be held approximately two to four weeks before classes begin. Those who are late for orientation will be moved to the back of the list, and considered after any alternates who were on time for orientation. You must pass the agility test, attend orientation, and be selected for program entrance before you will be allowed to register for the course.

ACTIVE DUTY MILITARY

FCTC recognizes that persons who are on active duty with the US military, particularly overseas, may have difficulty meeting all the standard application deadlines and activities. FCTC wishes to encourage the transition of those who have/ are serving in the military to civilian careers. Therefore, program staff reserve the right to make alternate arrangements when possible to accommodate military personnel. Contact Frank McElroy at frank.mcelroy@stjohns.k12.fl.us or Ronnette Waycaster at 904-547-3542 if special assistance is requested. (We will require copies of military orders to confirm eligibility for such accommodations.)

AUXILLIARY AID

FCTC provides aids and services for people with disabilities. FCTC staff are prohibited from asking if a student needs accommodations due to any disability. If you will need assistance during the course, please contact your Student Advisor in Building A, at the FCTC Main Campus.

FINANCIAL AID

FCTC encourages all students to apply for financial aid. Please visit our website at <http://fctc.edu/financial-aid/application-instructions/> for detailed instructions & the required forms packet. Once your online FASFA application has been submitted, you should contact the Financial Aid Office to make an appointment (fctcfinancialaid@stjohns.k12.fl.us) to meet with them, complete any FCTC specific paperwork, and discuss what funding you qualify for.

Our “**Career Navigators**” program may also be able to provide financial aid grant funds to those who meet program eligibility requirements. Use this link to get basic information about the program: <http://fctc.edu/future-students/career-navigators/>

You can start the Financial Aid process at any time. You do not have to wait for your orientation, Wonderlic test, TABE test, or program application to be done. You should have this process completed

before you attend the program orientation! Applying for financial aid & determining eligibility usually takes 1-2 weeks. All financial aid available through FCTC is grant funding or scholarships. We do NOT handle any student loan arrangements, as we strongly believe our students should be able to graduate debt free.

Tuition

Please see the program page on the FCTC website for Resident versus Non-Resident fees. Applicants who are unable to provide required documentation of Florida Residency for the past 12 months should expect to pay Non-Resident Tuition Fees. Florida Statutes and Department of Education rules establish proof-of-residency requirements and Resident versus Non-Resident tuition rates. FCTC staff must apply Non-Resident tuition charges in accordance with those requirements.

DRESS CODE Fire Fighter / EMT

A dress code that includes wearing a uniform during all classroom, field, and internship activities is in place. It includes limitations on hair, including a prohibition on facial hair that will affect the breathing apparatus face piece seal. Full details on the uniform / appearance policy are provided in the Program Policies and Procedures document, which will be distributed and discussed in detail during orientation.

COURSE DESCRIPTION

The Combined Fire Fighter / EMT Training and Certification Program meets all state requirements to become a State Certified Firefighter and EMT. Upon successful completion of the training program, and passing the State written and practical exams, you will be eligible for a Firefighter Certificate of Compliance provided you meet all legal requirements as outlined in Florida Statute 633.408. A Certificate of Compliance is the required Certification to work in Florida as a career firefighter for state and local government agencies. Provided you meet all other requirements, you will also satisfy the training requirements for the NREMT and Florida EMT certifications.

This course requires a dedicated effort from the student in classroom studies, practical activities, and physical agility 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) and Department of Health. 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.

Since the firefighter portion of our program is only scheduled for 398 hours due to Department of Education restrictions, a candidate who misses a single hour of class may be ineligible to take the state exam. If possible, the program will attempt to make arrangements for students who have missed 15 hours or less to make up the hours missed. You should understand that there may not be any opportunity to make up hours. If the hours are not made up you will not be certified as having completed the program. In the EMT portion of the program, you will be permitted to miss not more than sixteen hours.

If you know you will be unable to attend all scheduled class sessions, you should consider enrolling in a later class when your schedule will permit complete attendance.

GRADES

A minimum score of 70% is required to pass all firefighter tests. An overall average of 70% or better is required at the end of the firefighter courses for you to be eligible to take the State examination. EMT tests will require a passing score of 75%. Specific details for retaking exams will be given to you in the student handbook that is distributed in class.

COLLEGE CREDIT

First Coast Technical College is a Career Technical Center established as a part of the Florida Public School System, and is a component of the St. Johns County School District. As such, we are not authorized to issue college credit for our programs. However, the Florida Department of Education has established statewide articulation agreements between Florida's public Career Technical Centers and Florida's State College System. These agreements insure that students who meet certain conditions will receive college credit from a State College for certificate course work completed here at FCTC. EMT program graduates who pass the state certification exam will receive a minimum of 11 credits if they enroll in an AS in EMS degree program at any State College. Firefighter program graduates may receive 3 credits towards an Associates in Fire Science or similar degree program at a State College.

All the following documents should be included in your application packet submittal.

**FIRST COAST TECHNICAL COLLEGE
2980 COLLINS AVENUE
ST. AUGUSTINE FL 32084**

Date: _____

Time: _____

By: _____

Rcpt #: _____

FOCUS ID _____

FIRE FIGHTER / EMT – COMBINED Program Application

NOTE: A \$10.00 non-refundable/non-transferable application fee must accompany this form.

Preferred: Day Class Starting Date: _____
 Evening Class Starting Date: _____

Name: _____
 (Last) *(First)* *(Middle Initial)*

Mailing Address: _____

City: _____ State: _____ Zip: _____

Social Security Number: _____ Date of Birth: _____

Cell Phone: _____ Home Phone: _____

Email Address: _____

FCDICE Student Number: _____

Are you currently 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:

Course	Date Completed	School	Reason for Leaving Program

Current employer, if any: _____

General Application and Enrollment Checklist:

Applicants should initial each item that they have completed or are attaching, as noted. This page should be included in your application packet submittal.

Do NOT mark in the second column. That will be marked only by Public Safety Program staff who have verified that each item meets the required standards.

#	Program Staff Only!	Student Initial	Item
1			Pre-registration application completed at https://fctc.focusschoolsoftware.com/focus/apply/
2			User Profile created at www.floridastatefirecollege.org
3			Wonderlic testing completed (or scheduled)
4			FF / EMT Program Application - Cover Sheet
5			This checklist page
6			Medical Examination Form (DFS-K4-1022) – both pages signed
7			Health Certificate – Emergency medical Services Programs
8			Notarized Tobacco Affidavit
9			Copy of high school diploma, GED, or transcripts
10			Copy of valid driver's license
11			Proof of tetanus / diphtheria vaccination within 10 years
12			Proof of MMR vaccination (times 2) or immunity
12			Proof of Hepatitis B vaccination or immunity
14			Proof of "current" flu vaccination – see notes
15			TB skin test or chest x-ray results
16			Drug screen submitted – results will be forwarded to FCTC by clinic / lab
17			FDLE background check results
18			CPR certification (AHA Healthcare Provider or ARC Professional Rescuer only!)
19			Registered for physical ability assessment



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

NOTE: Healthcare Care Professional must sign both pages of this form!

(MEDICAL EXAMINATION CONTINUED)

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.

Physician/ Healthcare Professional's Signature: _____ Date: _____

HEALTH CERTIFICATE – FCTC Emergency Medical Services Programs

Name: _____ SS#: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell or Home Phone Number: _____

To the best of my knowledge, I am emotionally and physically capable of fully participating in the EMT program.

Student Signature

Date

THE FOLLOWING IS TO BE COMPLETED BY A LICENSED PHYSICIAN / HEALTHCARE PROFESSIONAL

This is to certify that _____ is free from
(Print Student's Name)

contagious diseases and is physically and emotionally capable of pursuing studies leading to certification as an emergency medical technician.

Physician's signature

Physician's printed name

Date

Physician's Address: _____

City: _____ State: _____ Zip: _____

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