**Firefighter - Application**

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Completion Date</th>
<th>Equivalent</th>
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<tbody>
<tr>
<td>Basic Wildland Fire Suppression (53) or Grass, Brush &amp; Forest Firefighting (11)</td>
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<tr>
<td>Rescue Technician-Basic (47) or Rescue Operations (24)</td>
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<td>Incident Command System (29)</td>
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<tr>
<td>Inspection of Existing Structures (2541)</td>
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<tr>
<td>Candidate Physical Ability Test</td>
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Attach copy of Standard First Aid or equivalent and Cardiopulmonary Resuscitation cards

**To facilitate your application, please include copies of any certificates for courses taken within the last six months.**

**Note: For equivalent course material in lieu of New York State courses, adequate documentation of course content, hours and completion must be submitted for review to the State Fire Administrator.**

I affirm that I have completed the courses as shown.

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**RETURN TO:**
Standards Unit  
NYS DHSES  
Office of Fire Prevention and Control  
1220 Washington Avenue  
Building 7A, Floor 2  
Albany NY 12226  
(518) 474-6746

SIGNATURE ___________________  DATE ________

RANK OR TITLE ___________________

NAME OF FIRE DEPARTMENT OR MUNICIPALITY ___________________

Additional copies of this application are available on the web at www.dhses.ny.gov/ofpc/training/fire-academy/certifications.cfm