



**State of Connecticut
Commission on Fire Prevention and Control**



**FIRE OFFICER II
Certification Examination Application Form**

Please **PRINT** all information legibly as it will appear on your permanent records. This **entire** application must be completed by **both** the trainer & trainee prior to submission.

APPLICANT DATA

Last name		First name		Middle Initial
Home Street Address				
Town			State	Zip Code
Telephone Home ()		Work ()		
Social Security Number _ _ - _ - _				
Date Certified as a State of Connecticut Fire Officer I:			Date Certified as a State of Connecticut Fire Service Instructor I:	

FIRE SERVICE AFFILIATION

Department Name		FDID # (if applicable)
Company/Unit	City/Town	
Check One: Career ____ Volunteer ____ Call ____		
Date entered fire service (if applicable, include both volunteer and career time)		

EXAMINATION DATA

Type of Examination (Check One) (Applicants may apply for both types of examinations on a single application)	
Written Examination ____ Date _____	(Required for Challenge Examination Only) Practical Examination ____ Date _____
Examination Location	Examination Location

\$7.50 application fee for a written examination and/or \$5.00 for a practical examination required with application. Please check type of payment below

Cash	Check (please indicate check # and date)	Purchase order	Inservice or Calendar Class (fee included in tuition)
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By my signature below, I certify that the above information is true and correct to the best of my knowledge and that I will be at least 18 years of age on the date of the examination.

Applicants Signature	Date
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Remit completed application and fee to: Commission on Fire Prevention and Control
34 Perimeter Road
Windsor Locks, CT 06096-1069

FIRE OFFICER II - INDIVIDUAL TRAINING RECORD

Name (Print)	Social Security Number:	
NFPA 1021 Chapter 3 Objectives	Quiz Grade <i>local option</i>	Date Psycho-Motor Objectives Met
3-2 Human Resource Management		N/A
3-3 Community Awareness/Public Relations	No Job Performance Requirements for Fire Officer II	
3-4 Organizational Structure	No Job Performance Requirements for Fire Officer II	
3-5 Administration	No Job Performance Requirements for Fire Officer II	
3-6 Budget		N/A
3-7 Government Structure		N/A
3-8 Communication Skill		
3-9 Information Management		
3-10 Planning		
3-11 Inspection, Investigation, and Public Education		
3-12 Emergency Service Delivery		N/A
3-13 Safety		

We the undersigned, do hereby certify that all psycho-motor skills as required in NFPA Standard 1021, Chapter 3, will have been satisfactorily performed and evaluated by the certified instructor whose signature appears below by the time of the Practical Skills Examination. It is understood that a skill evaluation will be administered by a representative of the Connecticut Commission on Fire Prevention and Control prior to granting of Certification.

Fire Officer II Trainee Signature	Date
Lead Instructor Printed Name	Telephone Number
Lead Instructor Signature	Date