Student Application Form

CFPC, 34 Perimeter Road
Windsor Locks, CT 06096-1069
Fax number: (860) 654-1889

FIRE PROTECTION SYSTEMS FOR EMERGENCY OPERATIONS
May 18th, 19th, 20th, 21st, 22nd, 23rd 2009

ID Number __ __ __- __ __ __ __

Your ID consists of the first (3) letters of your last name and the last (4) numbers of your social security number.

Example: John Adams - SS # 000-00-5555

The new ID # will be ADA-5555

Last Name

First Name

Home Address

City

State Zip

Phone (Home)

Work

Cell

Pager

Fire Department/Organization

Email

Check box if you would like to subscribe your e-mail address to the CFPC Listserve. ☐ Yes ☐ No

Are you 18 years of age or older? ☐ Yes ☐ No

(**No one under 18 is allowed to participate in hands-on programs**).

Acceptance notices with directions will be mailed approximately two (2) weeks prior to the start of the program.

Students canceling at least seven (7) days in advance of program will receive a full refund.

For more information, please contact Program Manager, Mark Salafia at 860-627-6363 ext. 286 with any questions or you can email Mark at: mark.salafia@po.state.ct.us.

As Chief of the Fire Department

or as Supervisor of the Organization

I hereby authorize the above applicant to participate in the program below and, therefore, understand that the above-named individual will be covered by my organization's Worker's Compensation Insurance while participating in such training, and that the Commission on Fire Prevention and Control, its commissioners, officers, agents or employees shall not be liable for any injuries sustained during such training. This applicant is considered by my department's standards to be physically and emotionally fit to perform firefighting evolutions without special considerations, and where applicable, to meet the 29 CFR 1910.134 standard for the use of respirators (Self-Contained Breathing Apparatus). **No application will be accepted without tuition, authorized signature and proof of prerequisite. (if needed)**

Chief or Supervisor Signature: _____

Method of Payment:

☐Check made payable to CFPC ☐Purchase Order # _____ ☐Visa ☐Master Card

Card # Exp. Date

Card Holder's Signature:

Course # 09216 Fire Protection Systems for Emergency Operations
May 18th, 19th, 20th, 21st,22nd, 23rd 2009 - $125.00

Connecticut Fire Academy