State of Connecticut
Department of Emergency Services and Public Protection
CONNECTICUT FIRE ACADEMY
INTRODUCTION TO THE FIRE SERVICE PROGRAM PRESENTS:

# JUNE FIRE SCHOOL CADET DAY

## SUNDAY, JUNE 1ST 2014 AT CFA

**This first-ever one-day class is designed to engage and energize Junior, Cadet and Explorer members and their Advisors with a full day of proven, exciting and team-based training. A few of the skills covered will include:**

**Engine Company: Handline Stretches and Nozzle Team Operations**

**Ladder Company: Forcible Entry and Ladders**

**Rescue Company: Search & Rescue, Tactical Fireground Ropes & Knots**

Photo Courtesy of Patrick Dooley at www.squadfirephotos.com

*An Affirmative Action/Equal Employment Opportunity Employer*

### WHO SHOULD COME?

- JUNIOR, CADET AND EXPLORER FIREFIGHTERS (BETWEEN 14 & 17 YEARS OLD)
- POST ADVISORS

### WHAT TO BRING?

- FULL PPE with eye protection
- Lunch (refrigerators available)

### STUDENTS WILL RECEIVE:

- A FULL DAY OF CHALLENGING AND APPLICABLE HANDS-ON TRAINING
- DRILL PLANS FOR IN-HOUSE TRAINING

### COST:

- $50 PER STUDENT (CLASS SIZE LIMITED TO 24 STUDENTS)

### CONTACT:

PROGRAM COORDINATOR : IAN TENNEY
IAN.TENNEY@CT.GOV

**APPLICATION ON REVERSE SIDE**

# Student Application Form

CFPC, 34 Perimeter Road
Windsor Locks, CT 06096-1069

**Sponsored by the**
**Commission on Fire Prevention and Control**
**Connecticut Fire Academy**

**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 _____

Fire Department/Organization _____

Email _____

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

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

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 a program will receive a full refund.. For more information, please contact Program Manager, Mark Salafia at 860-627-6363 ext. 286 or you can email Mark at: mark.salafia@ct.gov

**Returned check policy:**
A $25.00 fee will be assessed to all returned checks (insufficient funds, stop payment, etc). In order to complete your registration after the receipt of a returned check, you must submit cash, money order, or a bank check including the amount of tuition and the returned check fee to the registrar.

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: _____

Course Title: **June Fire School Cadet Day**

Course # **14340**

Dates: **Sunday June 1, 2014** Tuition: **$50.00**

**Method of Payment - Payment is required at time of registration. Faxes must include Credit Card or Purchase Order number.**

☐Check made payable to **CFPC**

☐Purchase Order # _____

☐Visa ☐Master Card # _____

Print Card Holders name: _____

Card Holder's Signature: _____ Exp. Date _____

**Connecticut Fire Academy**