

<b>Date Received:</b>
<b>Entered By:</b>

**Texas Commission  
on  
Fire Protection**

Fire Service Standards & Certification Division  
P. O. Box 2286, Austin, Texas 78768-2286  
(512) 936-3838 FAX (512) 936-3808

**Records Review Request Form**

<b>Date Approved:</b>
<b>Approved By:</b>

<b>Personal Information:</b>		<b>Type or clearly print all information.</b>			
<b>PIN# or SSN#</b>	<b>Last Name</b>	<b>Suffix:</b>	<b>First Name:</b>		<b>Middle Name or Initial:</b>
<b>Home Address of Applicant:</b>		<b>City:</b>		<b>State:</b>	<b>Zip Code:</b>
<b>Phone Number:</b>	<b>FAX Number:</b>				
<b>E-Mail Address:</b>	<b>Date of Birth</b>	<b>Race or Ethnicity</b>		<b>Sex</b>	
		<input type="checkbox"/> Black	<input type="checkbox"/> White (includes Hispanic)	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female

<b>Discipline Desired: (Please check all that apply)</b>		
Basic Structure Fire Protection (includes FFI, FFII, Aw/Op) <input type="checkbox"/>	Hazardous Materials Awareness <input type="checkbox"/>	Hazardous Materials Operations <input type="checkbox"/>
Fire Fighter I <input type="checkbox"/>	Fire Fighter II <input type="checkbox"/>	
Basic Aircraft Rescue Fire Protection <input type="checkbox"/>	Hazardous Materials Technician <input type="checkbox"/>	
Basic Marine Fire Protection <input type="checkbox"/>	Hazardous Materials Incident Commander <input type="checkbox"/>	
Basic Fire / Arson Investigator <input type="checkbox"/>	Driver Operator/Pumper <input type="checkbox"/>	
Basic Fire Inspector (includes Insp I, Insp II, and PE I) <input type="checkbox"/>	Fire Officer I <input type="checkbox"/>	
Fire Inspector I <input type="checkbox"/>	Fire Officer II <input type="checkbox"/>	
Fire Inspector II <input type="checkbox"/>	Fire Officer III <input type="checkbox"/>	
Plan Examiner I <input type="checkbox"/>	Fire Officer IV <input type="checkbox"/>	
Instructor I <input type="checkbox"/>	Instructor II <input type="checkbox"/>	Instructor III <input type="checkbox"/>
Incident Safety Officer <input type="checkbox"/>	Basic Wildland Fire Fighter <input type="checkbox"/>	Intermediate Wildland Fire Fighter <input type="checkbox"/>
<b>Supporting documentation <i>must be</i> submitted with this form!</b>		

<b>Fees for Records Review are Non-Refundable!</b>		
(See NOTE below)	Review of Out-of-State, Military, State Firemen's and Fire Marshal's Association and/or In-State Volunteer Training Records.	<b>\$35.00</b>
<b>Total Due</b>		

**NOTE:** These fees **do not** apply to an individual who holds an Advanced or Fire Fighter II certificate from the State Firemen and Fire Marshal's Association of Texas. Fees must be submitted prior to review of records and may be in the form of a cashier's check, money order, or personal check.

By my signature below, I attest I have read and agree that the statements on this form and any attachments to this form are true and correct. I understand any misstatements or omissions of material facts may constitute grounds for administrative proceedings by the T.C.F.P.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**Assurance of Training:**

Complete the information below **only** if documents / certificates of training are not available. This option is only available for training received outside the State of Texas. In-state training must have received prior commission approval and contain a commission approval number.

**Applicant's Name:** (please print applicant's name)

The commission reserves the right to verify the below information

To qualify to test for a Texas certification, training that meets **each** NFPA component required for that certification must be documented, including any prerequisite requirements. The applicant has been trained to the levels marked below.

**Check all boxes below that apply:**

**Structure Fire Protection**

NFPA 1001 Firefighter I  NFPA 1001 Firefighter II  NFPA 472 Haz-Mat Awareness  NFPA 472 Haz-Mat Operations

**Driver/Operator-Pumper**

NFPA 1002 (Chapter 2 and 3) Driver/Operator-Pumper

**Hazardous Materials**

NFPA 472 HazMat Technician  NFPA 472 HazMat Incident Commander

**Aircraft Rescue Fire Suppression**

NFPA 1003 Airport Firefighter

**Fire Officer**

NFPA 1021 Fire Officer I  NFPA 1021 Fire Officer II  NFPA 1021 Fire Officer III  NFPA 1021 Fire Officer IV

**Fire Investigator**

NFPA 1033 Fire Investigator

**Fire Inspector**

NFPA 1031 Fire Inspector I  NFPA 1031 Fire Inspector II  NFPA 1031 Plan Examiner I

**Fire Instructor**

NFPA 1041 Instructor I  NFPA 1041 Instructor II  NFPA 1041 Instructor III

**Fire Department Safety Officer**

NFPA 1521 Incident Safety Officer

**Wildland Fire Fighter**

NFPA 1051 Basic Wildland Fire Fighter  NFPA 1051 Intermediate Wildland Fire Fighter

The information above must be attested to by the department's **Training Officer and Fire Chief / Head of Department.**

**Department Information:**

<b>Fire Department Name:</b>	<b>Dept Phone No. (Non-Emergency)</b>		
<b>Fire Department Mailing Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>

\_\_\_\_\_  
Training Officer's Signature

\_\_\_\_\_  
Signature of Fire Chief or Administrative Head

\_\_\_\_\_  
Training Officer's Printed Name

\_\_\_\_\_  
Print Name of Fire Chief or Administrative Head

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date