

Date Received:	Texas Commission on Fire Protection Fire Service Standards & Certification Division	Date Processed:
	P.O. Box 2286, Austin, Texas 78768-2286 (512) 936-3838 FAX (512) 936-3808	
	Removal from Testing Roster	Processed By:

Important: Clearly **Type** or **Print** when completing this form.

Use this form when a student is dropped from the final state testing roster. To allow sufficient time to correct the testing roster, this form will only apply to students who are dropped at least two weeks prior to the state testing date.

Academy which the student is being dropped from:			
Academy Name:		FDID Number:	
Course Name:		Approval Number:	

Student(s) being removed from roster:				
Social Security No.	Last Name	Suffix	First Name	Middle Name or Initial
Date removed from Roster				

Social Security No.	Last Name	Suffix	First Name	Middle Name or Initial
Date removed from Roster				

Social Security No.	Last Name	Suffix	First Name	Middle Name or Initial
Date removed from Roster				

Printed Name of Academy Training Officer

Signature of Academy Training Officer

Date Signed