



Firefighter I & II
Training Academy

York County Chief's Association 2021 Firefighter I & II Training Academy Program Announcement

January 11, 2021 – May 22, 2021

The York County Chief's Association is pleased to announce its 2021 Firefighter I & II Academy, using the *International Fire Service Training Association (IFSTA) Essentials of Firefighting, 7th Edition* curriculum.

This program meets or exceeds the requirements of NFPA 1001; Standard for Firefighter Professional Qualifications, 2013 edition. The academy prepares the student for Pro Board Certification through Maine Fire Service Institute, which will be offered at the completion of the YCCA FF I & II Academy.

The student must possess the aptitude and cognitive learning skills to comprehend college level education. The course is offered in conjunction with the Maine Fire Service Institute and Southern Maine Community College. Applicants successfully obtaining certification are eligible to receive college credit for this course.

Applicants from York County departments will be given seat priority over applicants outside of York County.

Application Deadline: November 27th, 2020 @ 4:00 pm. Only completed applications will be accepted. Completed applications shall include signatures for the medical information section, and fire chief authorization.

Acceptance Letters: Acceptance letters will be emailed on December 1, 2020

Tuition: York County Students: \$750.00. Out of York County: \$850.00. Tuition includes textbook, student manuals, and required uniform shirt.

Student Orientation: December 15, 2020 @ 6:00 pm – West Kennebunk Fire Station

Class Schedule: Classes will begin on January 11, 2021, and are scheduled for Monday and Wednesday evenings, as well as most Saturdays, concluding on or about May 22, 2021. A full course schedule will be made available at the Student Orientation Night.

Minimum Number of Students: 12. The course may be cancelled if minimum enrollment is not met prior to November 27th, 2020.

For additional information please check our web site, www.yorkcountychiefs.org or contact Roger Hooper, York County Fire Administrator, (207) 459-2496 at rshooper@yorkcountymaine.gov

Completed Applications should be returned to:

2021 Firefighter I & II Academy
c/o Roger Hooper
York County Chiefs' Association
149 Jordan Springs Rd.
Alfred, ME, 04002

Completed and scanned applications will be accepted as well. Please send to: firetrain@yorkcountymaine.gov

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York County Chiefs' Association Firefighter I & II Academy 2021 Candidate Application

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Provider: _____

Email Address:
print VERY clearly – this will be our primary method of contact for you

Date of Birth: _____

Emergency Contact Name: _____

Emergency Contact Number(s): _____

Sponsoring Department: _____

Chief's Name: _____

Chief's Email Address:
Again, please print VERY clearly

Shirt Size: _____ S _____ M _____ L _____ XL _____ 2XL _____ 3XL (sizes tend to run small)

Do you have any of the following training? (Check all that apply)

___ NIMS IS-100 ___ NIMS IS-200 ___ NIMS IS-700
___ Maine Licensed EMS Provider: License # _____ Exp: _____ Level: _____

Please include copies of all certificates with application.

Academy 2021 Candidate Application

MEDICAL INFORMATION:

CURRENT SCBA FIT TEST AND MEDICAL CLEARANCE ARE BOTH MANDATORY FOR THIS COURSE

CANDIDATE'S SCBA FIT TEST DATE: _____

CANDIDATE'S MEDICAL CLEARANCE WAIVER DATE: _____

SIGNATURES:

FIRE CHIEF or DESIGNEE AUTHORIZATION

I hereby consent for the above named to participate in the above course and verify that he/she is covered by our department (or company) insurance, is not receiving workers compensation at this time, and his/her physical fitness level is appropriate for the course requested. The SCBA Fit Test and Medical Clearance dates above are accurate, and copies of these documents are available from our department (or company). Our department (or company) will produce these records in a timely manner upon request of the Program Coordinator. I also am confident that the above named has the aptitude and cognitive learning skills to comprehend college level education.

Name of Fire Chief or Designee: _____
(Please print)

Signature of Fire Chief or Designee: _____

Date: _____

APPLICANT DECLARATION

I hereby certify that all statements made on or in connections with this application are true and complete to the best of my knowledge and belief. I understand and agree that any misstatements or omissions of material facts will cause denial or forfeiture of my certifications.

Also, by signing this form I hereby authorize the release of any or all information concerning my enrollment status, for the courses requesting certification and certification exam results only to the Chief Officer, Program Coordinator or their designee of my organization. I also authorize the release of my course information including grades, attendance, and other academic information to the Chief, or their designee, of my sponsoring agency.

A photo-static copy of this authorization will be considered as effective and valid as the original.

Name of Applicant: _____
(Please print)

Signature of Applicant: _____

Date: _____