



# Firefighter I Local Verification & Mask Fit Form

## NFPA 1001 – 2008

Candidate's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### Local Verification Requirements

**1. 29 CFR 1910.134, Mask Fit Documentation:**

The candidate has been successfully fitted to his or her Self-Contained Breathing Apparatus (SCBA) Mask in compliance with 29 CFR 1910.134 within the last twelve (12) calendar months.

**2. NFPA 1001 – 2008, JPR 4.3, Medical Training:**

The candidate has successfully completed the emergency medical care performance capabilities in compliance with the objectives in NFPA 1001 – 2008, including CPR, infection control, bleeding control, and shock management. These requirements are developed and have been validated at the local level per departmental protocol. Documentation of the requirements contained below are subject to verification by KF&RTI in written form and/or a hard copy of the document(s).

**3. NFPA 1001 – 2008, JPR 5.1.2, Locate Information in Departmental SOPs:**

The candidate has successfully demonstrated the ability to successfully locate information in departmental SOPs/SOGs.

**4. NFPA 1001 – 2008, JPR 5.5.1, Complete Recording & Reporting Procedures:**

The candidate has successfully demonstrated the ability to successfully complete departmental equipment maintenance records and comply with departmental maintenance reporting procedures.

I have reviewed the candidate's file and affirm that the candidate identified above has met the requirements listed in paragraphs 1 through 4 above. All requirements have been successfully conducted and completed per local department protocol. All information listed above can be validated by a written and/or hard copy of the documents maintained by the department.

\_\_\_\_\_  
Typed or Legibly Printed Name of Fire Chief or Training Officer

\_\_\_\_\_  
Signature of Fire Chief or Training Officer

Date: \_\_\_\_\_ Department: \_\_\_\_\_

Fire Department Phone Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Mail Completed Form To:** Kansas Fire & Rescue Training Institute, KU Continuing Education, 1515 St Andrews Drive, Lawrence, KS 66047