KANSAS FIRE & RESCUE TRAINING INSTITUTE
The University of Kansas

National Certification Application Form

Return Application to: Kansas Fire & Rescue Training Institute
ATTN: Certification
1515 St. Andrews Drive
Lawrence, Kansas 66047-1625
FAX: 785-864-9044
E-mail: kufire@ku.edu

Personal Information

First Name	MI	Last Name	Suffix	Date of Birth (Month/Date/Year)

Home Address	Home City	State	Zip Code

Home Phone	Work Phone	Mobile Phone
( )	( )	( )

Email Address	FAX
	( )

Fire Dept. or Organization	Fire Dept. or Organization Address

Certification Category & Level

Please **CHECK ONLY ONE** the category/level of certification for which you are applying per registration form. For certification pre-requisites, please refer to the KF&RTI web site (www.continuinged.ku.edu).

- ☐ Fire Fighter I* (includes HazMat Awareness & Operations)
- ☐ Fire Fighter II*
- ☐ Driver/Operator-Aerial
- ☐ Driver/Operator-ARFF
- ☐ Driver/Operator-Pumper
- ☐ HazMat Awareness
- ☐ HazMat Operations*
- ☐ HazMat Technician*
- ☐ Fire Inspector I
- ☐ Fire Service Instructor I
- ☐ Fire Service Instructor II
- ☐ Fire Officer I
- ☐ Fire Officer II
- ☐ Airport Fire Fighter*
- ☐ Rope Rescue – Level I
- ☐ Rope Rescue – Level II
- ☐ Structural Collapse Rescue – Levels I&II*
- ☐ Confined Space – Levels I&II*

*** Indicates a level that requires verification of SCBA Fit Testing. See statement below.**
Please contact KF&RTI at toll free at 866-804-8841 or refer to web site for the certification fee schedule.

Payment Method

Each application must be accompanied by payment of appropriate certification fees. Approved methods of payment are listed below. Please indicate the method of payment you will use. Please do not send cash.

☐ Payment enclosed (check or money order) ☐ Bill my department or organization.

Charge to my: ☐ Mastercard ☐ VISA ☐ Discover ☐ American Express.

Account No: ☐☐☐☐ - ☐☐☐☐ - ☐☐☐☐ - ☐☐☐☐ Expiration Date: ☐☐ / ☐☐

Name as it appears on card: _____

NO FEE. End-of-course test ONLY for one of the following courses:
- ☐ Fire Officer I
- ☐ Fire Officer II
- ☐ Inspector I

(No certification will be issued.)

Test Site Registration

If you know the location & date of the test site that you wish to attend, please indicate it below. A certification exam schedule can be obtained by contacting KF&RTI by phone or visiting our web site.

Location: _____ Test Date: _____

Special Accommodation

☐ If you need special accommodation, please check the box preceding this statement & you will be contacted by a staff member.

Applicant's Verification

I verify that I have reviewed the certification guidelines as stated in the Kansas Fire & Rescue Training Institute Certification Criteria and Procedures document and agree to conform to those guidelines. I further verify that all information submitted on this form is accurate.

_____
Applicant's Signature

Verification Authority

I verify the person listed on this form has been fit tested as per OSHA 29 CFR Part 1910.134. This form must be signed by the person conducting the fit test, the Fire Chief, or the Authority Having Jurisdiction. *(Required for: FFI, FFII, HM Ops, HM Tech, Airport FF.)*

_____
Signature of Verification Authority

Revised September 2011