

**APPENDIX B
EMERGENCY SERVICES PROVIDER CERTIFICATION FORM
MONTGOMERY COUNTY FIRE AND RESCUE SERVICE**

Applicant's Name _____ Date _____
 LFRD _____ SS # _____
 Primary Assigned Station _____ MCFRS ID# _____
 Driver License Class _____ No. _____ Date of Birth _____
 Membership Date _____ Rank Requested _____

TRAINING (Completion or expiration date included for all training completed)	LOSAP or CAREER <u>Category/Rank</u> F/R or EMS	ACTIVE EXPERIENCE <u>Time in Rank</u> From	<u>Yrs. Held</u> To
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_____ Volunteer Physical on file			
_____ Station Orientation			
_____ Air/Bloodborne Pathogens	_____ Recruit	_____	_____
_____ AED	_____ I	_____	_____
_____ HazMat Operations	_____ II	_____	_____
_____ Human Relations-EEO/AA & the law	_____ III	_____	_____
_____ Human Relations-Cultural Diversity	_____ Master	_____	_____
_____ SCBA/PPE	_____ Lieutenant	_____	_____
_____ Voice Radio, MDC, Incident Reportg.	_____ Captain	_____	_____
_____ Essentials of Firefighting I	_____ Cert. Chief Off'r	_____	_____
_____ Emerg. Med. Tech. (expiration date)	_____ LFRD Chief	_____	_____
_____ Basic Trauma Life Support (BTLS)	_____ Division Chief	_____	_____
_____ EMT-I, Cardiac Technician, Paramedic			
_____ CPR Instructor			
_____ Firefighter I, II, III			
_____ MFSPQB Certification			
_____ Emergency Vehicle Operator's Course			
_____ Strategies & Tactics Course			
_____ Technical Rescue Course			
_____ Pump Operations			
_____ Aerial Operations			
_____ Instructor I, II			
_____ SCBA Fit Test			
_____ EMS Officer I, II, III			
_____ Fire Officer I, II, III			
_____ EMS Company Operations			
_____ EMS Officer I Course			
_____ Pediatric Advanced Life Support (PALS)			
_____ Other			
_____ Incident Command			
_____ COPDI (if applicable)			
_____ WMD			
_____ NIMS 100			
_____ NIMS 200			
_____ NIMS 300			
_____ NIMS 400			
_____ NIMS 700			
_____ NIMS 800			

I hereby certify that the information provided on this form is correct

Signature Date

(Must be signed by the LFRD Chief)

Please attach documentation for actual training or equivalency, EMT card, and CPR card.