



CALL/VOLUNTEER FIREFIGHTER TRAINING PROGRAM APPLICATION

Training Location: _____ **Start Date:** _____
Student Name: _____
MFA Student ID: _____
Department: _____
Email Address: _____ **Phone:** _____

MASSACHUSETTS TRAINING COUNCIL PROTECTIVE CLOTHING COMPLIANCE FORM

In accordance with the Massachusetts Fire Training Council policy for Live Fire Training Exercises and Evolutions, this section must be completed for each person who registers for any Academy program which includes live fire training.

I hereby attest that the ensemble (ensemble includes helmet, protective hood, coat, trousers, gloves and boots)

to be used by: _____ provided by: this department the student
(print student's name)

will at all times throughout the participation of the live fire training, be less than ten (10) years old. In addition, I further attest that this ensemble also complies with the following standards:

- NFPA 1971: Standard on Protective Ensemble for Structural Firefighting and Proximity Fire Fighting
- OSHA 29 CFR 1910.156(e) (2) (iii)

Chief of Department Signature: _____ Date: _____

Student Signature: _____ Date: _____

MASSACHUSETTS TRAINING COUNCIL STATEMENT OF COMPLIANCE

- I have read the Rules and Regulations. I further understand that my failure to abide by the rules and regulations as set forth can result in my dismissal from the program.
- I certify that I am 18 years of age or older.
- I certify that I have a High School Diploma or GED in order to be eligible for entry into the program.

Chief of Department Signature: _____ Date: _____

Student Signature: _____ Date: _____

Must be submitted to complete the application process