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## SUFFOLK COUNTY FIRE ACADEMY CLASSROOM FIREFIGHTER 1 PERSONAL ATTENDANCE SHEET

FDID#: 52 \_\_\_\_\_ Department Name: \_\_\_\_\_

\*SCFA Student ID# \_\_\_\_\_ Student Name: \_\_\_\_\_

*\*SCFA Student I.D. # consists of the first two letters of your last name and the last four digits of your social security number. Obtain Fire Department Identification # (FDID #) from Instructor*

Location	Session	Subject	Date	Instructor Signature
	1	Firefighter 1 Orientation/ Building Construction		
	2	Safety/FD Organization/ Communications		
	3	PPE/Fire Extinguishers		
	4	Fire Behavior		
	5	Tactical Ventilation		
	6	Search/Victim Removal		
	7	Forcible Entry/Ladders		
	8	Ropes & Knots/Loss Control		
	9	Water Supply/Fire Hoses & Streams		
	10	Fire Origin/Cause/Life Safety		
	11	Fire Control		
	12	Haz Mat Operations Module A		
	13	Haz Mat Operations Module B		
	14	Haz Mat Operations Workshop		

# Suffolk County Fire Academy

## FIREFIGHTER I

### Training Authorization Letter

To the Suffolk County Fire Academy:

The firefighter listed below is an active member of \_\_\_\_\_ Fire Department, is at least 16 years of age, and is authorized to attend the course indicated below. I understand this training course may contain certain evolutions that simulate and/or create actual firefighting or rescue conditions. The Suffolk County Fire Academy is not responsible and/or liable for any malfunction or damage to any equipment used during this training program.

Fill in YES or NO	YES	No
The firefighter listed below has medical clearance to use Self Contained Breathing Apparatus, (SCBA), in accordance with 29 C.F.R. part 1910.134.		
The firefighter listed below is authorized to use SCBA and participate in interior/exterior firefighting evolutions.		
The firefighter listed below is CPR and First Aid Certified as per the current NFPA 1001 standard.		

Print \_\_\_\_\_ Chief's \_\_\_\_\_  
 Chief's Name Signature Date

Course Information

Course \_\_\_\_\_ Course \_\_\_\_\_  
 Record # **01-05-0019** Title **FIREFIGHTER I**

Student Information

Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_  
 Name

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Home \_\_\_\_\_ Work \_\_\_\_\_  
 Phone ( ) Phone ( ) Zip \_\_\_\_\_

I, \_\_\_\_\_, have read, fully understand and agree with above information. I understand and acknowledge the importance of safety during the training course and further acknowledge that if an instructor believes that my behavior or abilities may cause a safety risk to myself or another, the instructor has the authority to remove me from the simulation or course.

\_\_\_\_\_  
 SIGNATURE OF FIREFIGHTER DATE

And, if firefighter is 16 or 17 years old, the following consent must be provided:

I, \_\_\_\_\_, parent or legal guardian of \_\_\_\_\_ consent to his/her participation in the training listed above. I have read, fully understand, and agree with the above information. I understand and acknowledge that safety is important during the training course and further authorize the instructor to remove \_\_\_\_\_ from the simulation or course if the instructor believes that his/her behavior or abilities may cause a safety risk to himself/herself or another.

\_\_\_\_\_  
 SIGNATURE OF AUTHORIZED LEGAL GUARDIAN DATE

\_\_\_\_\_  
 PRINTED NAME RELATIONSHIP TO FIREFIGHTER

**Please note:** No persons under the age of 16 may attend or participate in any training course delivered by the Suffolk County Fire Academy.

**Suffolk County Fire Academy  
FLASHOVER SIMULATOR  
Training Authorization Letter**

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**The following must be completed and presented prior to receiving Flashover Survival training.**

I am an active interior firefighter with the \_\_\_\_\_ Fire Department and covered by my department/district's insurance while participating in this training, and that the Suffolk County Fire Academy, its directors or employees shall not be liable for any injuries sustained during such training. I am considered by my department's standards to be physically and emotionally fit to perform firefighting evolutions without special considerations, and where applicable, to meet the CFR 1910.134 standard for the use of respirators (Self-Contained Breathing Apparatus). I further understand that the Suffolk County Fire Academy, its directors or employees shall not be liable for any damage to my protective equipment while participating in Flashover Survival training.

I acknowledge and will abide by the following safety standards:

- Long pants and long sleeve shirt must be worn.
- No wet gear is permitted.
- No performance based clothing, i.e. Under Armour© type.
- All metal articles on undergarments or skin, i.e. piercings, bras, etc. are prohibited.

I, \_\_\_\_\_, have read, fully understand and agree with the above information.  
PRINT NAME OF FIREFIGHTER

I understand and acknowledge the importance of safety during the training course and further acknowledge that if an instructor believes that my behavior or abilities may cause a safety risk to myself or another, the instructor has the authority to remove me from the simulation or course.

\_\_\_\_\_  
SIGNATURE OF FIREFIGHTER

\_\_\_\_\_  
DATE

And, if the firefighter is 16 or 17 years old, the following consent must be provided:

I, \_\_\_\_\_, parent or legal guardian of \_\_\_\_\_ consent  
PRINT PRINT NAME OF FIREFIGHTER  
to his/her participation in the training listed above. I have read, fully understand, and agree with the above information. I understand and acknowledge that safety is important during the training course and further authorize the instructor to remove \_\_\_\_\_ from the simulation or  
PRINT NAME OF FIREFIGHTER  
course if the instructor believes that his/her behavior or abilities may cause a safety risk to himself/herself or another.

\_\_\_\_\_  
SIGNATURE OF AUTHORIZED LEGAL GUARDIAN

\_\_\_\_\_  
DATE

**Please note:** No persons under the age of 16 may attend or participate in any training course delivered by the Suffolk County Fire Academy.

**SUFFOLK COUNTY FIRE ACADEMY  
CLASSROOM FIREFIGHTER 1 PERSONAL ATTENDANCE SHEET**

FDID#: 52 \_\_\_\_\_ Department Name: \_\_\_\_\_

\*SCFA Student ID# \_\_\_\_\_ Student Name: \_\_\_\_\_

**FEMA NIMS On-Line Classes Must be Completed Prior to the First Session**

You need to access the classes at the FEMA website: <http://training.fema.gov/IS/NIMS.aspx>  
Certificates of completion will be verified by Fire Academy Instructor

Date	Subject	Instructor Print Name	Instructor Signature
	IS-700.a		
	ICS 100.b		
	ICS 200.b		

**Hands-on Skills  
Live Fire Suppression Verification**

Date	Subject	Instructor Print Name	Instructor Signature
	Search/Victim & Firefighter Removal		
	SCBA Emergencies		
	Ladders		
	Tools/Car Fires		
	Fire Behavior/Flashover		
	Int. Structural Attack/Hose Handling JPR#: 5.3.10		

**Final Exam  
Taken upon completion of all Lectures and Hands-on Skills training**

Date	Subject	Instructor Print Name	Instructor Signature
	Practical Skills & Final Exam		

**NOTE:** Full turnout gear and SCBA is required at all hands-on skills training.

## Firefighter I Student Registration Form

This form ***must be completed*** by all Firefighter I Students and submitted to the Fire Academy Instructor at the ***FIRST Session of the Firefighter I Course*** (Orientation).

Student Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

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

Student Email: \_\_\_\_\_

Department Training Chief's Email: \_\_\_\_\_

I hereby authorize the Instructors and/or staff at the Suffolk County Fire Academy to discuss my progress in the Firefighter I Training course with my Training Chief.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## FIREFIGHTER 1 READING ASSIGNMENTS

Subject	IFSTA Essentials of Firefighting Edition 6
Firefighter 1 Orientation/ Building Construction	Chapter 4
Safety/FD Organization/ Communications	Chapters 1, 2 & 3
PPE/Fire Extinguishers	Chapters 6 & 7
Fire Behavior	Chapter 5
Loss Control	Chapter 18
Search/Victim Removal	Chapter 9
Forcible Entry/Ladders	Chapters 11 & 12
Ropes & Knots	Chapters 8
Tactical Ventilation	Chapter 13
Water Supply/Fire Hoses & Streams	Chapters 14, 15 (pg. 812-871) & 16 (pg. 940-966)
Fire Origin/Cause/Life Safety	Chapters 19 (pg. 1142-1162) & 21 (pg. 1218-1240)
Fire Control	Chapter 17 (pg. 1000-1056)
Haz Mat Operations Module A	Chapter 23
Haz Mat Operations Module B	Chapter 24

# SCFA FIREFIGHTER-1

## Rules and Responsibilities

The Firefighter-1 Course consists of twenty one (21) firefighting subjects and three (3) sessions of Hazardous Materials Operations training. Additionally, there are six (6) Hands-On Training "HOT" exercises that must be completed.

### Responsibilities of the Student:

You must register for the course and be accepted prior to attending the first sessions.

- **Obtain course materials prior to attending the first class** (Orientation / Building Const)
  - Course materials include: Firefighter-1 Student textbook, rope short, DOT/Emergency Response Guide and paperwork packet.
  - **Read and comply with the class syllabus**
  - The textbook is the **IFSTA Essentials of Fire Fighting and Fire Department Operations (6<sup>th</sup> edition)**.
  - **Enroll in the class on the IFSTA ResourceOne website.** *The link and enrollment key is included in the confirmation letter.*
  - **Download and print the following paperwork from the SCFA website (paperwork packet):**
    - 1) Personal attendance sheet** (stamp sheet)
    - 2) Training Authorization Letter** – This letter must be completed and signed by your department's Chief and attached to your stamp sheet prior to the first class.
    - 3) Reading assignment sheet**
    - 4) Flashover Authorization form** – Must be completed, signed and attached to stamp sheet prior to the first class.
    - 5) Student registration form**- Must be filled out completely.
    - 6) HOT Orientation sheet**
- Complete the pre-course assignment.
- All reading assignments must be completed prior to the class.
- **Bring your personal attendance stamp sheet to ALL classes.** *Do not lose this sheet.* It is your proof that you have attended the classes. **Fill in the location and date prior to having the instructor stamp the sheet.**
- Print and sign the Fire Academy attendance sheet at all classes and be sure to include your student I.D. number. If your name is not on the attendance sheet, or it is not legible, you will not receive credit for the class.
  - *Your student I.D. number is: the first two letters of your last name followed by the last four numbers of your social security number.* This number is used to track all student records, so be sure to include it whenever you sign an attendance sheet.
  - **There is a \$25.00 fee to replace lost or damaged stamp sheets.**

# SCFA FIREFIGHTER–1

## Rules and Responsibilities

- Text book must be brought to all classroom sessions.
- Emergency Response Guide (ERG) must be brought to all HazMat sessions
- The rope short must be brought to all classes and all Hands on Training (HOT) Sessions.
  - **You must be on time for all sessions and dressed appropriately.** Hats, offensive clothing and cell phone are prohibited in classrooms.
  - **Full PPE, SCBA and spare cylinder are required for all Hands on Training (HOT) sessions. Long pants and a long-sleeved shirt are required. All piercings must be removed. SCFA is not responsible for your PPE, SCBA, Cylinders, personal items or other equipment while you attend training. Ensure all of these items are properly marked with your Fire Department name or identification numbers and maintain appropriate vigilance in the care of these items.**
- All required assignments (quizzes, tests, on-line posts, etc.) must be successfully completed prior to the HazMat Operations Workshop. **A mark of at least 75% on each test/quiz is required.**
- Any student two weeks in arrears may be required to withdraw from the course.

### Additional Course Requirements:

- **CPR** – The Chief of your fire department must certify on the Training Authorization Letter that you have complied with the CPR and First Aid requirements prior to the first class.
- **NIMS - You must complete FEMA IS-700, ICS 100 and ICS 200 prior to the first class. These programs can be taken on line and accessed at the FEMA website.** Certificates of completion will be verified by the Fire Academy Instructor at the first class.
- **The *Final Exam* is in two parts; Practical Skills Exam and a 150 question written final exam.**
  - The student must successfully complete the Practical Skills Exam and pass the 150 question written test with a minimum score of 70% in order to receive certification. The Practical Skills Exam must be successfully completed prior to taking the written exam.
  - Verbal exams are available for students with a documented learning disability.
  - Results of the test will be mailed to your department's Chief. **Do not call the Academy for the results.**



**Suffolk County Fire Academy**  
**Firefighter I – Hands on Training**  
**Rules and Procedures**

- Weekend classes start at 9:00 a.m. and weeknight classes start at 7:30 p.m. **You should be seated in the classroom 15 minutes prior to the start of each session.** In the event of an unforeseen lateness, call 631-924-6822 x 211 to inform the Field Supervisor.
- Upon arrival at the Fire Academy, place your PPE on the Gear racks located outside on the west side of the building.
- If there is inclement weather, check the bulletin board in the foyer for directions for gear placement.
- Check the bulletin board in the foyer for your classroom assignment.
- Present your **completed paperwork packet** to the instructor and sign the attendance sheets.
- Bring water and maintain proper hydration levels during training.
- The rope short must be brought to all Hands on Training (HOT) Sessions.
- You must be dressed appropriately for training. Performance-based clothing (Under Armour type) is prohibited. Long pants and long-sleeved shirts are required.
- All metal articles on undergarments or skin are prohibited.
- Full PPE, SCBA and a spare cylinder are required for all Hands on Training (HOT) sessions. **Ensure the SCBA is in working order (no low battery alarms).**
- **The Suffolk County Fire Academy is not responsible for your PPE, SCBA, Cylinders, personal items or other equipment while you attend training. Ensure all of these items are properly marked with your Fire Department name or identification numbers and maintain appropriate vigilance in the care of these items.**
- **Flashover Safety –**
  1. *Long pants and Shirt is required (bring at least one extra shirt).*
  2. *All piercings and jewelry must be removed.*
  3. *No metal straps or underwire Bras.*
  4. *Wet gear is prohibited.*
  5. ***This class is offered on the first day of Hands on Training. Be prepared***
- At the conclusion of daily training, ensure your stamp sheet has been signed by the instructor and that you fill in the date of training.
- **Listen to and obey orders from the instructors.**