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SUFFOLK COUNTY FIRE ACADEMY BASIC EXTERIOR FIREFIGHTER PERSONAL ATTENDANCE SHEET

Student Name: _____
FDID#: 52 _____ **Department Name:** _____
***SCFA Student ID#** _____ **NYS Training I.D.#:** _____
Lead Instructor: _____ **Instr. Contact Info:** _____

**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	Basic Exterior Firefighter Orientation		
	2	Building Construction		
Virtual	3	Intro to Fire Service & Communications		
	4	Fire Dynamics		
	5	Ladders & Forcible Entry		
Self-Paced	6	PPE & Fire Extinguishers		
	7	Tactical Ventilation		
Self-Paced	8	Fire Hose & Ropes		
	9	Hose Operations		
N/A	10	N/A	N/A	N/A
	11	Fire Suppression		
Self-Paced	12	Overhaul, Property Conservation & Scene Preservation		
	13	Haz Mat Operations 1		
Self-Paced	14	Haz Mat Operations 2		
	15	Haz Mat Operations Workshop		
	16	Final Exam		

Suffolk County Fire Academy BASIC EXTERIOR FIREFIGHTER 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 and DATE	YES	DATE
The firefighter listed below is CPR and First Aid Certified as per the current NFPA 1001 standard.		

Print Chief's Name	Chief's Signature	Date
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Course Information

Course Record #	Course Title	BASIC EXTERIOR FIREFIGHTER
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Student Information

Last Name	First	MI
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Address	City	State
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Home Phone ()	Work Phone	()	Zip
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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
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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
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PRINTED NAME	RELATIONSHIP TO FIREFIGHTER
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Please note: No persons under the age of 16 may attend or participate in any training course delivered by the Suffolk County Fire Academy.

SCFA Basic Exterior Firefighter

Rules and Responsibilities

The Basic Exterior Firefighter Course consists of 15 firefighting subjects and the Final Exam.

Responsibilities of the Student:

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

- **Obtain course materials prior to attending the first class (Orientation)**
 - 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 (7th edition)**.
 - **Enroll in the class on the IFSTA ResourceOne website.** *The link and enrollment key are included in the confirmation letter.*
 - **Download and print the following forms from the SCFA website (paperwork packet):**
 - 1) Personal attendance sheet** (stamp sheet)
 - 2) Student registration form**- Must be filled out completely.
 - 3) BEFO Training authorization form**
 - 4) Student Data Sheet** - *You must use this form to obtain a NYS ID#. Submit it to NYS OFPC as per instructions on the document.*
- Complete the pre-course assignment.
- **There is a \$25.00 fee to replace lost or damaged stamp sheets.**
- Emergency Response Guide (ERG) must be available for all HazMat sessions.
- **You must be logged on 5 minutes prior to Virtual sessions.**
- 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 who does not remain current with the required test, quizzes, assignments and discussion forum post may be required to withdraw from the course.**

SCFA Basic Exterior Firefighter

Rules and Responsibilities

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 ICS 100 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* consists of a 100-question written final exam.**
 - The student must pass the 100-question written test with a minimum score of 70% in order to receive certification.
 - Results of the test will be mailed to your department's Chief. **Do not call the Academy for the results.**
 - Any student who does not pass the written test, may retake the exam (must be taken within one year of the start date for the course). If the student fails the exam for a second time, they must retake the entire course.
 - All students must take the final exam. If a student fails the written exam and has a valid IEP he/she must submit the application to request a reasonable accommodation. The application can be obtained on the scfa-li.org website in the download section.
Under no circumstances are verbal exams permitted.



Student Data Sheet

Requesting New Student ID Update to Current Student ID

Student Identification # grid

Student Name

Student Name form with fields for Last Name, Suffix, First Name, M.I.

Primary Agency

Primary Agency form with fields for FD Identification #, Appt. Date, Primary Name

Secondary Agency

Secondary Agency form with fields for FD Identification #, Appt. Date, Secondary Name

Student Information

Student Information form with fields for Address, City, State, Zip

Primary Phone and Primary Email fields

Date of Birth field

Last 4 of Social Security # field

Gender (optional) Male Female

Education Level (optional)

Education Level form with checkboxes for High School / GED, Associates, Masters, Some College, Bachelors, Other

Submit Form

or print and email a scanned copy to: ofpc.training@dhses.ny.gov

OFFICIAL USE ONLY

Data sheet processed by:

Date ID emailed to student: grid

Basic Exterior Firefighter Student Registration Form

This form ***must be completed*** by all Basic Exterior Firefighter Students and submitted to the Fire Academy Instructor at the ***FIRST Session of the 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 Basic Exterior Firefighter course with my Training Chief.

Signature: _____ Date: _____