

Firefighter I Volunteer Training Scholarship Application



Please complete the following form to apply for a volunteer training scholarship:

Volunteer Contact			
Name:			
Address:			
City:		State:	
Phone:		Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Email:			
Race:	<input type="checkbox"/> White	<input type="checkbox"/> Hispanic, Latino, or Spanish origin	
	<input type="checkbox"/> Alaska Native	<input type="checkbox"/> Black, African American, or Negro	
	<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Asian	
	<input type="checkbox"/> American Indian	<input type="checkbox"/> Other	
Fire Department Contact			
Chief:			
Training Officer:			
Address:			
City:		State:	
Email:		Phone:	
Firefighter I Training			
Check all Firefighter I training in which the volunteer has already received:			
<input type="checkbox"/> Communications	<input type="checkbox"/> Ropes & Knots	<input type="checkbox"/> Hose/Water Fire Streams	
<input type="checkbox"/> Firefighter Safety	<input type="checkbox"/> Search & Rescue	<input type="checkbox"/> Salvage & Overhaul	
<input type="checkbox"/> Fire Behavior	<input type="checkbox"/> Forcible Entry	<input type="checkbox"/> HAZMAT Operation Level	
<input type="checkbox"/> Building Construction	<input type="checkbox"/> Ladders	<input type="checkbox"/> First Responder	
<input type="checkbox"/> PPE/SCBA	<input type="checkbox"/> Ventilation	<input type="checkbox"/> Live Fire Evolutions	
<input type="checkbox"/> Fire Extinguishers	<input type="checkbox"/> Water Supply	<input type="checkbox"/> S130	
<input type="checkbox"/> NIMS IS-100/IS-700	<input type="checkbox"/> Sprinkler Systems	<input type="checkbox"/> S190	
Training Scholarship Request			
Which of the following training program(s) is this request for?			
<input type="checkbox"/> S130/S190 <i>September 18-22</i>	<input type="checkbox"/> Live Fire Evolutions <i>September 21-22</i>	<input type="checkbox"/> Firefighter I Skills Task Book, 2nd Sign-off <i>September 19-20</i>	
Will you need lodging?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

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Please sign the form to complete the application:

Volunteer Firefighter Agreement

I agree to obtain my Firefighter I certification within 4 months of completing the training requested above, by January 24, 2020. I understand that I am accepting federal funds from the Department of Homeland Security and am obligated to fulfill my responsibility to complete the Firefighter I training. I also understand that if I do not obtain my Firefighter I certification by this date, I will repay the full amount of scholarship money received. If Firefighter I is not completed, I will repay the Northwest Volunteer Firefighter Weekend Council, Inc. by April 30, 2020.

Exception will be made for individuals who receive federal orders which require the individual to move out of the state of Florida.

Volunteer Firefighter
Signature:

Date:

Chief Officer Agreement

I confirm that the volunteer firefighter listed above has received the past training indicated on this form. I understand that it is the responsibility of the volunteer firefighter to obtain his/her Firefighter I certification by January 24, 2020. I also understand that if the volunteer listed above fails to do so, he/she is required to repay the full amount of scholarship money received. If Firefighter I certification is not completed, he/she must repay the Northwest Volunteer Firefighter Weekend Council, Inc. by April 30, 2020.

Exception will be made for individuals who receive federal orders which require the individual to move out of the state of Florida.

Chief Officer Name:

Chief Officer
Signature:

Date:

Please fax the completed form to 877-468-7309

*The Northwest Florida Volunteer Firefighter Weekend Council, Inc.
admits students of any, race, color, and national or ethnic origin.*