This intensive 12 college credit hour program is 16 weeks in length (including state testing). The Academy provides an intensive instructional program that satisfies the certification requirement to take the State Firefighter I and Haz mat ops exams. The Academy’s rigorous instruction includes lectures by seasoned firefighters, and hands-on practicals. The Academy student will experience operations such as house burns, car fires, forcible entry, ground fires, and many others. If you are looking for a career in firefighting, or if you want to serve as a volunteer firefighter in your community, this is an excellent place to begin. Limited between 25 to 50 slots. Each Semester.

Students who pass the Firefighter I portion of the Academy should take the State (CDFP&C) Firefighter I written and practical certification exams, including the live burn exam (approximately $150).

Students who pass the Hazardous Materials portion should take the State (CDFP&C) Hazardous Materials Awareness and Operations written exams and practical certification exam (approximately $120).

***State exams are not a requirement to pass the Academy, but are strongly suggested in order to participate with and be a part of most organizations post academy. Students who might need financial assistance in taking these exams will need to meet with the financial aid personnel at the college for more information at the start of the class.***

**Please read and print the entire packet thoroughly for a clear understanding of the application process and Academy expectations. All phases of the Academy will be held at a specific site as posted and can include being at the college for orientation night. Contact the Department Chair, Retired Chief, John Padgett for further information 303-914-6791**

Red Rocks Community College is committed to diversity in its people and programs. The College is an equal opportunity educational institution which prohibits all forms of discrimination and harassment including those that violate federal and state law, or the State Board for Community Colleges and Occupational Education Board Policies 3-120 and/or 4-120. The College does not discriminate on the basis of race, creed, color, sex/gender, sexual orientation, gender identity or expression, religion, age, national origin or ancestry, pregnancy status, veterans status, genetic information, physical and or mental disability or any other category protected by applicable law in its employment opportunities or education programs. The college will take appropriate steps to ensure that the lack of English language skills will not be a barrier to admission and/or participation in vocational educational programs. The college has designated the HR department with the responsibility to coordinate its civil rights compliance activities and grievance procedures. For information contact: at 303-914-6298 13300 West Sixth Avenue, Lakewood Colorado, 80228-1255

**Mandatory Orientation:**

* The ***mandatory orientation*** for the Fall 2022 Academy is planning to be held on August 9th between 6:00 pm to 8:00 pm at a site yet to be determined. **When determined*.* Be there early to check in!**
* ***After this date, we will no longer register students for this semester’s academy except under certain circumstances approved by the Department Chair or Dean of Instruction. We reserve the right to adjust this orientation time, location, presentation and attendance requirements, do to restrictions and other items that might arise beyond our control.***

* Specific COVID pandemic guidelines may be required to be followed during this meeting.
* All requirements by the school or the academy drill grounds and or classrooms must be adhered to. Limit one guest per person for the academy orientation. Bring your masks and own hand sanitizer. All students ***are*** required to have proof of completed COVID vaccinations before they are allowed to participate in the academy. These are collected on the first day of class and or during orientation.

* The Fire Academy training is academically, physically and mentally rigorous and exacting; students are strongly encouraged to bring one parent, spouse of significant other to this meeting so that they too may understand what will be asked of each Fire Academy student, (when allowed).

* At the orientation, the **Red Rocks Fire Academy Drill Master** and the Faculty Chair or their assignees will explain the guidelines, procedures, and policies required to successfully complete the Academy and pass the State Written and Practical Exams

**General Information:**

* The Academy is held every Thursday and Friday from 6:45am to 5:00 pm and runs Aug 18th to 12/15/2022. The building is open at 6 Am. There are no sick days and you are expected to be at class before start time each day.HazMat and FF1 exams normally follow after the academy or as scheduled by the Drill Master. A class schedule will be provided at the beginning of the class. Pay attention to any schedule changes as might be posted and we reserve the right to adjust the schedule at any time.
* There is a maximum enrollment of 50 students, 25 students when requested by the State or County Health departments. Each semester
* Students should plan on spending approximately 2 hours of study/practice time for each hour spent in class and on practical skills (roughly 36 hours of homework/study per week)
* The State of Colorado Division of Fire Prevention & Control (CDFP&C) certification testing dates (Firefighter I and Hazardous Materials Operations) will be announced in the Academy

The fire academy consists of **FST 1001 and FST 1007.** Sing up and register for both. Classes run concurrently, and students will meet and attend these classes on Thursdays and Fridays. At a site TBD. Optional clinical ride along will be scheduled outside of any class time and only when allowed due to COVID restrictions. These times are also listed below if available. In some cases, such as with military funding requirements the student will need to have up to 3 more college credits taken the same semester as the academy classes to apply for such benefits and this class would be a suggested area of study. Other Fire Science classes are listed in the Catalog relating to a fire science degree. Such as FST 1010 See/Contact the department chair for further questions and follow up.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Course**  | **Title**  | **Day(s)**  | **Class Times**  | **Proposed Course Dates**  |
| FST 1001 -  | Essentials of Firefighting | RF  | 6:45 am – 5:00 pm  | Orientation day August 9thClass runs Thursdays and Friday Aug 18th to 12/15/2022 Dates may be adjusted do to testing, COVID issues, or needs of the academy  |
| **Course**  | **Title**  | **Day(s)**  | **Class Times**  | **Proposed Course Dates**  |
| FST 1007 -  | Hazardous Materials Operations  | RF  | 6:45 am – 5:00 pm  | Orientation day August 9thClass runs Thursdays and Friday Aug 18th to 12/15/2022 Dates may be adjusted do to testing, COVID issues, or needs of the academy |
| Optional FST 1070 OrFST 1010  | Fire Academy Clinical 1 (Not part of the academy) Job Placement and assessment  | TAs in Catalog  | 7:30 am – 8:45 am and as assigned As in Catalog  | Not required for academy. Suggested course military and 15 hrs credit selection |

**Prerequisites:**

* Proof of age 18 by the first day of class (no exceptions)
* Must possess a high school diploma or GED
* The student must be eligible to enroll in ENG 1021 or provide proof of completion of ENG 1021, or its equivalent, with a grade of C or higher
* **Required, Completed COVID Shot Vaccinations at least two weeks before start of the academy and before orientation night.**

**Co-requisites:**

The fire academy is generally taken during the first or second semester of the Fire and Emergency Services Degree. It is highly recommended that you take at least one three credit general education course during an Academy semester to stay on track to complete your degree in four semesters, or to fulfill any military funding requirements. (15 credit hrs.)

**Special health department Requirements are in place:**

 It is the student’s responsibility to follow all guidelines required to have a safer academy experience. Plan on adjustments to the schedule and other safety requirements being updated on a as need basis. All students ***are*** required to have proof of completed COVID vaccinations before they are allowed to participate in the academy.

**Program Cost:**

Resident tuition and fees (with COF applied) are approximately **$2,500**. Nonresident tuition and fees are approximate. Included in these figures is a special Fire Science fee of **$425.** Financial aid may be available. Please contact RRCC Financial aid directly with questions.

Each addition each student must purchase required textbooks and workbooks (approximately **$300**), NFPA compliant structural firefighting “bunker” boots (approximately **$150**), NFPA compliant structural firefighting gloves (approximately **$80**), Protective hood (approximately **$40**), two academy tee shirts (approximately **$15** each) and two Blue BDU style pants (approximately **$35** each). Two academy Face masks if required with correct color and logo, at prevailing costs. Vendor information will be provided at the orientation.

**All tuition and costs listed are approximate and subject to change.**

**Physical Demands:**

Firefighting is an extremely physically demanding profession. Students are expected to be physically fit. To participate in the academy, students are required to pass the assigned physical fitness ability test. This test is administered only two times. At the start of the academy and if you fail the first testing a few weeks into the academy.

**RRCC Basic PAT test (Physical Ability Test)**

**Example, actual test may vary according to site.**

The Applicant Physical Ability Test (PAT) was developed to obtain a pool of trainable employees who are physically able to perform essential job tasks at fire and medical scenes., and to provide to students a means of what to expect when applying for positions in the fire service. This PAT is comprised of two-timed sections: Section 1: Fire ground tasks, includes six stations. Section 2: Wildland aerobic capacity evaluation, one station. The PAT is a score-based test just like the written exam with more points awarded for lower times. This test can be used as a pass/fail test or a score-based test. Refer to any Volunteer, Combination or full paid career agencies requirements for those you will be working at or attempting to get on. Purpose of course is to be physically fit for this strenuous endeavor.

**RULES: STRUCTURAL/EMERGENCY RESPONSE TASKS:**

1. An Applicant while climbing and or descending steps in a tower or stair set up must strike every step with one of his/her feet in all sections of the tower. Failure to strike each and every stair will result in immediate disqualification. There will be no sprinting/running allowed inside the tower. 2. Applicant may run in all phases of the PAT course that occur outside of the tower. 3. Applicant must complete each station in its entirety before transition to the next subsequent station. Failure to correctly complete each station will result in termination of the test. 4. Failure to complete Section 1, stations 1-6, in 5:00 to 6 minutes (or less) will result in automatic termination of the PAT. 5.
2. Failure to complete Section 2, the "Wildland Task", in less than 3 to 4 minutes will result in automatic termination of the PAT. 6. PAT scores will be based on successful completion of the entire course. Scores are arranged by time deviations. 7. Time will start when the applicant steps forward onto the first stair and ascend to the top/turn around marker. For stations 1-6 the applicant can wear gloves (can use own), and will wear SCBA, self-contained breathing apparatus (without face piece), and comfortable physical fitness attire. 8. Wildland Task: The applicant will wear a 40-pound vest for station 7. The applicants time will start and stop when the applicant crosses the line with any part of his/her head or body***. RRCC students need to complete both sections in 10 minutes or less to qualify for class passing grade, and to proceed the rest of the academy…. This test can be taken twice during the academy. Once usually in the first day or to of class and if needed a second time three to 5 weeks later but before fire training. To continue along with this class.***

**STATION 1: TOWER CLIMB:**

The applicant will enter on east side double door and carry a 50 pound hi-rise pack (made up of one 50' section of 2½" hose) up to the top/turnaround marker (100 steps). Time will start when the applicant steps forward onto the first stair.

STATION 1-2 TRANSITION: Walk/jog directly from turnaround marker back down to 3rd floor (down 60 stairs) using the same interior stairwell. No use of handrails unless applicant falls and uses rails to catch oneself. **CRITICAL SAFETY FAILURES: • FAILURE TO USE EVERY STEP WHILE ASCENDINGOR DESCENDING STAIRS • RUNNING/SPRINTING WHILE INSIDE THE TOWER • USING HANDRAILS DUE TO FATIGUE AND NOT LOSS OF BALANCE**

**STATION 2: EQUIPMENT HOIST**: While standing behind the line, applicant hoists a 50-pound bag/hose roll to the balcony of the 3rd floor using a hand over hand method. Applicant shall be in complete control of the bag. The proctor shall notify the applicant when the bag is fully raised. Applicant can then let go of rope allowing bag to drop.

 STATION 2-3 TRANSITION: Applicant will move to the right down hallway to first stairwell located in the middle of the tower, on the east side of building, and descend down exterior stairwell to the sidewalk, turn left, and head south to Station 3. Once applicant is off the staircase they can proceed as fast as individually possible through the remainder of the course. Reminder: Descend tower striking each and every stair. **CRITICAL SAFETY FAILURES: • CROSSING THE LINE • FAILURE TO HOIST THE BAG IN A HAND OVER HAND METHOD TO THE WINDOWSILL • FAILURE TO CONTROL BAG - ALLOWING THE ROPE TO SLIDE THROUGH HANDS • FAILURE TO USE EVERY STEP WHILE DESCENDING DOWN TOWER STAIRS • SITTING DOWN TO USE WEIGHT OF BODY TO MOVE BAG UPWARD INSTEAD OF UPPER BODY STRENGTH, LEGS/GLUTES MUST STAY AT 90 DEGREES OR ABOVE LIKE SITTING IN A CHAIR**

**STATION 3: PULLEY EXTENSION:**

 Applicant will assume a "ready position". The applicant will raise a 50lb high-rise pack hand over hand and extend the pulley to simulate a 3-section 30' foot ladder to the top of the pulley, and then lower the pulley to the starting position, hand under hand. The pulley shall be operated with full control at all times, applicant cannot let pulley slide through hands.

**CRITICAL SAFETY FAILURES: • ALLOWING WAIST TO DROP MORE THAN 12" FROM THE "READY POSITION" • FAILURE TO FULLY RETRACT THE PULLEY TO THE BOTTOM • FAILURE TO OPERATE THE ROPE IN A HAND OVER HAND METHOD-ROPE CAN NOT BE WRAPPED AROUND THE APPLICANTS HAND OR ARM WHEN RAISING THE HIGH-RISE PACK UPWARD • FAILURE TO CONTROL THE PULLEY BY HAND UNDER HAND METHOD OR LETTING ROPE SLIP THROUGH HANDS WHEN LOWERING HIGH-RISE PACK BACK DOWN TO STARTING POSITION • APPLICANT CANNOT SIT-DOWN OR MOVE FEET BACKWARD TO ASSIST IS RAISING HIGH-RISE PACK UP**

STATION 3-4 TRANSITION: Advance to station 4 by traveling 100’ west to charged hose line.

**STATION 4: CHARGED HOSELINE EXTENSION:** Applicant will drag a charged 1¾ hose line 75', and place the nozzle on the ground. (Just set down the hose and do not flow water)

STATION 4-5 TRANSITION: Advance to station 5 by running diagonally 45’ to position A or B. **CRITICAL SAFETY FAILURES: • FAILURE TO DRAG THE HOSELINE 75' • THROWING NOZZLE ON THE GROUND**

**STATION 5: DUMMY DRAG:** Applicant will drag/carry the "victim dummy" 75'. Part of dummy must stay in contact with ground at all times – at least the feet. STATION 5-6 TRANSITION: Advance to station 6 by going east 110’ to fan carry. **CRITICAL SAFETY FAILURES: • FAILURE TO DRAG OR CARRY THE DUMMY 75' • LIFTING THE RESCUE DUMMY COMPLETELY OFF THE GROUND**

**STATION 6: FAN CARRY:** Applicant will remove a PPV fan from 4 foot platform, carry 150', and return PPV fan to the platform in an upright position. Time for section 1 will stop when the fan is placed back on the platform. **CRITICAL SAFETY FAILURES: • FAILURE TO CARRY THE PPV FAN ENTIRE DISTANCE • FAILURE TO REPLACE THE PPV FAN IN AN UPRIGHT POSITION • DROPPING PPV FAN DURING ANY PORTION OF THIS EVENT DUE TO FATIGUE • FAILURE TO KEEP FAN ABOVE WAIST HEIGHT AT ALL TIMES • FAILURE TO COMPLETE SECTION IN 5:30** ►

STATION 6-7 TRANSITION: Applicant will be assisted in removing SCBA and gloves as soon as he/she finishes section 1, and will directly, without rest, walk roughly 200’ directly to the Wildland Station. Applicant will then immediately be assisted in putting on a 40-pound vest and move to the start position of event 7. Stall tactics to create a longer rest period will result in immediate disqualification. (A one minute to two minute rest period may be offered at some sites before completion of second session of PAT)

**STATION 7: WILDLAND AEROBIC CAPACITY EVALUATION:**

Applicant will walk or run with a 40-pound vest ¼ mile. The clock will start when the applicant crosses the starting line. There will be a posted turn around point half way through the event.

 The Physical Ability Test is complete, and clock will stop, when applicant passes over ¼ mile finish line with any part of the head or body. **CRITICAL SAFETY FAILURES: • FAILURE TO COMPLETE ENTIRE ¼ MILE DISTANCE • FAILURE TO COMPLETE ¼ MILE FAST-WALK/RUN IN 3:00 MINUTES OR UNDER PHYSICAL ABILITY TEST IS COMPLETE!**

**WHAT TO WEAR TO THE PAT?** • Running Shoes • Shorts or Sweat Pants (loose pants) • T-Shirt (long or short sleeve) • Gloves are optional, will be provided if you don’t have a pair. Bring a class set of clothes once testing is over, as approved by Academy staff.

Generic Information about the PAT is available on YouTube under PAT testing and at:

* [Physical Ability Test (PAT)](http://www.westmetrofire.org/documentcenter/view/3370)

* [Detailed Physical Ability Test](http://www.westmetrofire.org/documentcenter/view/4059)

* [PAT Video](http://youtu.be/qbwtNImrkC0)

* [Suggested Work-Out Programs](http://www.westmetrofire.org/documentcenter/view/3314)

Students should not underestimate the physical demands of the academy. It is crucial that students have an exercise program prior to attending the academy, and start increasing their endurance and aerobic conditioning several months prior to the start of the academy.

 **Students are required to provide a signed Medical Release Form on the first day of the Academy. Students will not be allowed to participate without this form in the physical agility test. RRCC students can have this form completed at the Red Rocks Student Health Clinic when open.**

**Academic Demands:**

The program demands a high level of academic performance both within the classroom as well as with homework assignments. This requires the student attend all class sessions as well as adequately prepare for and follow through with the workload outside of class. Students can expect approximately two hours of homework/study time for each hour of time spent in class or on Drill Ground. **This equates to an additional 36 hours per week outside of the classroom or Drill Grounds**.

RRCC reminds students, if this is their first semester of post-secondary education, of the heavy workload and self-discipline necessary to successfully complete the Academy and Haz Mat programs. Students may elect to forgo this academy until after one semester of course work is completed at the college, but this not required. Students will need a high level of maturity to meet the challenge, and will be rewarded for a job well done concerning this career path.

**College Placement Exam:**

The college placement exam is offered at the RRCC Assessment Center for students who have not met the English 121 pre-requisite. Please visit the [Assessment Center website](http://www.rrcc.edu/assessment) for testing times and availability, or contact them at 303-914-6720.

No appointment is needed for the computerized exam and there is no cost for the initial attempt. Allow approximately two hours to complete the exam. Placement exams must have been taken within the last five years to be accepted for admission into the academy

**Registration Process:**

Registration for the **Fall 2022 semester** will start on **April 4th 2022** Students with all of the required pre-requisites are admitted to the program on a first-come, first-served basis.

Please complete the steps shown below.

* Complete the RRCC online application and sign up for COF (College Opportunity Fund) at Red Rocks Community College.
* Ensure eligibility to enroll in ENG 1021 either through placement exam scores or prior coursework, or show proof of prior completion of ENG 1021, or its equivalent, with a C or better.
* Obtain a copy of your high school diploma or GED.
* Obtain proof of age 18 by the first day of class (no exceptions).
* Once the above documents/processes have been completed, meet with a RRCC advisor. (It is suggested an initial consultation with a faculty member or FST Department Chair occurs as well).

Advisors will **assist students in the registration process** for the Fire Academy and will check for **appropriate prerequisites**

* Complete a background check (Instructions come later in this document)
* Complete FEMA online classes to obtain the ICS certificates. (Instructions come later in this document)
* **All application packets must be completed, printed, signed, and filled out by orientation night. Bring these completed packets to the orientation night and to the first day of class. The first day of class you will turn in your packets to the Drill Master or their designee.** **See first day of class requirements, as well.**

**Marijuana Thoughts in Public Service Occupations**

In 2012, with the approval of Amendment 64, the use of recreational marijuana became legal in Colorado for those 21 years of age and older. In 2015 in the case of Coats vs. Dish Network, the Colorado Supreme Court ruled that employers do have the right to refuse employment, or terminate employment, for the use of marijuana (recreational or medical), even in situations where that use was when the employee was not on paid time.

Currently most public safety agencies and healthcare agencies continue to prohibit the use of marijuana in their substance abuse policies and employment policies, which includes students who are completing clinical rotations as part of their educational program.

**First Day of Class:**

* **Bring the following information to the first day of class**
* Copy of Driver’s License or a government issued photo ID with birthdate
* Copy of FEMA ICS 100, ICS 200, and ICS 700 certificates
* Proof of completion of a background check through CastleBranch
* Proof of healthcare insurance
* Completed student information form
* A completed medical release form, signed by a health care provider, documenting that you do not have any condition that would endanger your health during your education
* Proof of vaccinations, (including COVID) and a TB test within 12 months are also required.
* The medical release form can be completed by the student’s primary care physician, or at the Red Rocks student health clinic when open.
* A completed RRCC Release of Liability Form
* A completed site facility Release of Liability Form
* A CPR card demonstrating completion of a CPR course at either the *Healthcare Provider* or *BLS Provider* level. (This is a one-day course offered at Red Rocks Community College as HPR 102. It may also be taken at any CPR training center. The card must be valid.
* Required textbooks obtained from the RRCC bookstore or on line
* Change of clothes from classroom attire to work out clothes
* Masks until assigned masks are handed out when required
* Personal hand and desk sanitizing material
* **Proof of COVID Vaccination completion**

**Background Check**

The background check is completed by an external company, CastleBranch, and is mandatory for all students participating in a healthcare program. Background checks must have been completed within the last 12 months, and cannot be transferred from another school.

Please visit the [CastleBranch website](http://cccs.castlebranch.com/) (cccs.castlebranch.com) to complete the background check.

* On the home screen please click on “Place Order”
* Click on “Red Rocks Community College” on the page requesting you to select your school
* From the dropdown box choose “Fire Science Technology Academy”
* From the next dropdown box that appears on that page choose the appropriate option
* Do not click anything, just wait for the page to reload
* Confirm your order, click the box at the bottom indicating you have read the terms and conditions, and click on “Continue Order”
* Complete the following screens providing the requested information.

Be sure your information is correct. It is not possible to make changes to your order after it has been submitted. IF your order is submitted with incorrect information you will need to submit another background check with additional fees.

Please contact CastleBranch at 1-888-723-4263 or customerexp.cu@castlebranch.com with any questions or if you experience any problems with the ordering process.

If the investigation reveals information that could be relevant to the application, the designated individual responsible for background checks may request additional information from the applicant. The offense shall be reviewed on a case by case basis.

Students who have successfully completed the terms of a deferred adjudication agreement will not be disqualified.

If any applicant feels the criminal background check is inaccurate, they may appeal the decision and request a review with the specific community college applied at. It is the applicant’s burden to produce substantial evidence that proves the crimes charged are incorrect.

**Disqualifying offenses:**

Any conviction of the following criminal offenses appearing on a criminal background check will disqualify an applicant for admission to a CCCS Health Program.

* Any violent felony convictions of homicide
* Crimes of violence (assault, sexual offense, arson, kidnapping, any crime against an at-risk adult or juvenile, etc.) as defined in section 18-1.3-406 C.R.S. in the 7 years immediately preceding the submittal of application
* Any offense involving unlawful sexual behavior in the 7 years immediately preceding the submittal of application
* Any offense of which the underlying basis has been found by the court on the record to include an act of domestic violence, as defined in section 18-6-800.3 C.R.S. in the 7 years immediately preceding the submittal of application
* Any crime of child abuse, as defined in section 18-6-401 C.R.S. in the 7 years immediately preceding the submittal of application
* Any crime related to the sale, possession, distribution or transfer of narcotics or controlled substances in the 7 years immediately preceding the submittal of application
* Any felony crimes of theft in the 7 years immediately preceding the submittal of application
* Any misdemeanor crimes of theft in the 5 years immediately preceding the submittal of application
* Any offense of sexual assault on a client by a psychotherapist, as defined in section 18-3-

405.5 C.R.S. in the 7 years immediately preceding the submittal of application

* Crimes of moral turpitude (prostitution, public lewdness/exposure, etc.) in the 7 years immediately preceding the submittal of application
* Registered sex offenders (No time limit)
* More than one (1) D.U.I. in the 7 years immediately preceding the submittal of application
* Any offense in another state, the elements which are substantially similar to the elements of any of the above offenses

 Approved CCCS 6/8/2007. Re-approved 4/12/2012. Reviewed and amended 4/1/2019

**Acceptable BCLS Cards**

As stated in Colorado Board of Health Rules 6-CCR-1015-3, Chapter 1- EMS Rules CPR at the healthcare provider level is required to be an EMT in the state of Colorado. Moreover, most of the EMS agencies and hospitals we utilize for the clinical and internship portions of our programs require CPR for the Healthcare Provider or BLS provider from the American Heart Association. Therefore, the following CPR cards are the only ones that will be accepted by the RRCC EMS Program.

**American Heart Association**

* BLS Provider
* BLS Instructor

|  |
| --- |
| All students who do not have a CPR card that is valid through the end of their course must  |
| enroll in a section of HPR 102 that completes before the drop date of the semester. |   |

The exact card issued may look like one of the examples on the next page or may vary based on when it was issued.

The decisions of the RRCC clinical coordinator regarding whether or not a course meets the RRCC clinical requirements is final for classes being set up for ridealongs

 

**Notes:**

 **Firefighter I Academy Student Information Form**

# Please type or print

 Student ID number: (S number issued by RRCC):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

 Last First Middle

 Date of Birth: (Month, Day, Year) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Secondary Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Emergency Contacts**

 Name Relationship Primary Phone Secondary Phone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current medications: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Personal Physician: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In the event of an emergency, I hereby authorize Red Rocks Community College and/or West Metro Fire to release all information on this form to appropriate medical personnel.

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

# Red Rocks Firefighter 1 Academy Medical Release Form Please Type or Print

 **Instructions for Providers**

The above-named person has been extended an offer of admission to the Red Rocks Community College Fire Academy. To matriculate into the Academy, the student must demonstrate that he/she is free of any medical conditions that would prevent him/her from performing the physical tasks necessary for a fire career.

Academy students are expected to perform at emergency incidents and will be required to perform in training drills and emergency exercises. Students will participate in exercises that include but are not limited to fire suppression activities, ladder exercises, hose and fire stream operations, and physical conditioning. Tasks that the academy students will be asked to do (but are not limited to) will include: running, sitting, lifting, throwing, kneeling, squatting; general calisthenics - sit ups, pull ups, pushing, jumping, and obstacle courses, etc.

These students are required to meet the standards of CFR 1910.134 (Respiratory Protection). At the expense of the student, please interview and examine this prospective student and complete the statement on the following page.

Medical conditions that may disqualify or postpone a person from participating in the academy **include** **contracting any communicable disease such as COVID,** and are not limited to:

|  |  |
| --- | --- |
| * All uncontrolled seizure disorders
* Allergic respiratory disorder
* Anemia
* Arthritis
* Asthma
* Chronic lung diseases
* Chronic sinusitis
* Congestive heart failure
* Diabetes mellitus
* Disorders producing orthostatic hypotension
* Documented predisposition to heat stress
* Emphysema
* Hemophilia, VonWillebrand's disease and other clotting/bleeding disorders
* Hernia
 | * Impaired immune system
* Labyrinthine or vestibular disorders with vertigo
* Malignant diseases not in remission
* Multiple sclerosis
* Muscular atrophies
* Myocardial insufficiency
* Neurological disorders with ataxia
* Peripheral vascular disease
* Pregnancy (after 1st trimester)
* Progressive muscular dystrophy
* Severe congenital deformities of the spine, trunk, or limbs
* Severe eczema or other dermatitis including dyshidrotic types
* Severe limitations of motion of joints
 |

Additional Reference: NFPA 1582 – Medical requirements for fire fighter

This form is valid for 12 calendar months.

You are welcome to call the Red Rocks Fire Academy Chair at 303-914-6791. Please complete and sign

# Red Rocks Firefighter 1 Academy Medical Release Form

**NAME OF PATIENT:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand the above-named patient has been tentatively extended an offer of admission to the Red Rocks Firefighter 1 Academy during the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ semester of 20\_\_\_\_\_

I have examined \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and have determined that in accordance with CFR 1910.134 (Respiratory Protection) the applicant

\_\_\_ Does *not* have a health or physical condition which could endanger the health or well-being of themselves, faculty or students, or would prevent them from performing the physical tasks required for a firefighter academy

\_\_\_ Does appear to have a health or physical condition which could endanger the health or well-being of themselves, faculty or students, or would prevent them from performing the physical tasks required for a firefighter academy

**Additional Requirements:**

Please also provide documentation of the following tests/vaccinations:

1. Chicken pox or Varivax vaccination Date of illness or vaccination: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Tetanus Date of last vaccination or booster: \_\_\_\_\_\_\_\_\_\_\_\_\_
3. MMR Date of last vaccination or booster: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Tuberculosis Testing ( less than one year old)

Date Tested: \_\_\_\_\_\_\_\_\_\_\_\_\_ Date Read: \_\_\_\_\_\_\_\_\_\_\_\_ Positive/Negative (circle one)

If **positive**, date re-tested: \_\_\_\_\_\_\_\_ Date Read: \_\_\_\_\_\_\_\_ Positive/Negative (circle one) If **positive**, date of Chest X-Ray: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Hepatitis B Vaccine (3-shot series)

 Date 1st vaccine received \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Titer Date (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date 2nd vaccine received \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Results: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date 3rd vaccine received \_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Seasonal Influenza Vaccine Date of vaccination: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. COVID-19 Vaccine

 Date 1st vaccine received \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Titer Date (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date 2nd vaccine received \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Results: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature of provider Date*

 *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Printed name and Professional Degree of provider* *Telephone number*

**RED ROCKS COMMUNITY COLLEGE**

# STUDENT WAIVER OF LIABILITY FORM

Red Rocks Community College is an Institution of Higher Education in the State of Colorado and, as such, is covered by the Colorado Governmental Immunity Act, C.R.S. 24-20-101 et seq. This law provides that the State and its institutions are immune from lawsuits for injuries suffered by private persons, except, in specific situations listed in the law, where immunity is specifically waived. In other words, by law, if a student suffers an injury as a result of a participation in instructional activities of the college, the college is immune from fiscal liability for such injury. For this reason, students are strongly encouraged to obtain medical insurance coverage, if they do not already have coverage, before participating in activities that present a risk of physical injury.

I am exercising my own free choice to participate voluntarily in (Firefighter One Training Academy), and I promise to take due care during such participation. I have been informed of the nature of these activities, and I am aware of the hazards and risks that may be associated with my participation in these activities, including the risks of bodily injury, death or damage to property from known or unknown causes.

In consideration of the privilege of participating in instruction offered by employees of Red Rocks Community College, I have and do hereby assume all risks and will hold Red Rocks Community College and its employees and agents harmless from any and all liability, actions, causes of action, debts, claims and demands of every kind and nature whatsoever which I now have or which may arise from or in connection with participation in instruction activities arranged for me by Red Rocks Community College or its employees or agents. The terms hereof shall serve as a release and assumption of risk for my heirs, executors and administrators and all members of my family.

In signing below, I hereby assert that:

* I have read this document
* I understand that Red Rocks Community College is covered by the Colorado Governmental Immunity Act
* I am personally liable for injuries that I may suffer as a result of participation in this activity

Student Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Specific Fire Training Agency Release Agreement

By participating in any training program (regardless of the sponsorship of such program), that involves the use of any of the facilities of said Training Center (herein, “Facilities”), the undersigned participant expressly agrees the said training facility shall not be liable for any damages arising from personal injuries sustained by the party in, on or about the premises of the Facilities or as a result of using the Facilities and/or the equipment thereon.

By the execution of this Agreement, the undersigned participant acknowledges and assumes full risk and responsibility for any personal injuries, damages, or losses which may occur to such participant on or about the premises of the Facilities, regardless of participation in any program, and does hereby fully release and discharge the said training facilities (including its officers, employees and agents) from any and all claims, demands, rights of action or causes of action, present or future, known or unknown, resulting from arising out of the undersigned’s use of the Facilities or the equipment thereon.

The undersigned further acknowledges and agrees that the said training facilities (including is officers, employees, and agents) shall not be liable for any damage, loss or theft of any party’s personal property occurring while the undersigned is present at the Facilities.

The undersigned also acknowledges and agrees that the said training facility acting by and through its Training Center employees, reserves the right to call emergency medical aid for an injured party and said party accepts responsibility for any financial obligations arising from such emergency medical aid or transportation to a medical facility, through health insurance or otherwise.

Party agrees to keep and obey all rules and regulations of the Specific Training Center for the use of facilities and the equipment and facilities therein.

This Agreement shall be interpreted in accordance with the statutes of the state of Colorado, and if any particular provision in this contract shall be deemed invalid, the same shall not affect the balance of this contract and the remaining provisions thereof.

This release and agreement shall be binding upon me, any of my heirs, executors, administrators, personal representatives and assigns, and shall inure to the benefit of the said training facility, officers, and members herein designated, and their heirs, executors, administrators, personal representatives, assigns and successors in office.

 Dated this: day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_\_\_

 Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

# Instructions for completing FEMA online courses

**Prior to the first day of the academy you will need to go to the**

**How to apply for a FEMA Independent Study course (Online Course)**

* Register for a Student Identification Number (SID) if you have not done so already. How do I obtain my FEMA SID?
* Select a course from [our course list](https://training.fema.gov/IS/crslist.aspx).
* Review course materials by choosing any one of the options.
* Select the "Take Final Exam Online" link (found on each Course Overview page).
* Enter your SID and your additional Student Information.
* Answer the exam questions and submit your answer choices.

**FEMA Web Site** <https://training.fema.gov/nims/>

**Search ICS and NIMS Courses, Select courses then “Take this Course tab” for each class.**

<https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c>

<https://training.fema.gov/is/courseoverview.aspx?code=IS-200.c>

<https://training.fema.gov/is/courseoverview.aspx?code=IS-700.b>

**Or the National fire academy site**

<https://apps.usfa.fema.gov/nfacourses/catalog/details/518>

for the on-line Independent Study Program (ISP) classes. These are available at NO COST. You will need to complete the following courses and bring the certificates with you to class on the first day. Each certificate is worth 3 points towards your grade. It can take up to a week to get your certificates, so do this as soon as possible.

Scroll down to select a course and complete it. After you take the final test at the end of each course you will enter your information into their system and they send you an email letting you know if you passed or not. If you passed, there will be a link to a site to print out a certificate for that course. If you did not pass, you will have instructions on how to retake the test.



# OSHA Medical Reporting To be completed by the applicant

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sex: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Height: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Weight: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Have you worn a respirator? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

* 1. If yes, what type? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you currently smoke tobacco? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

1. Have you smoked tobacco in the last month? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

1. Have you ever had any of the following? (Circle or highlight all that apply)

* 1. Seizures
	2. Diabetes
	3. Allergic reactions
	4. Claustrophobia
	5. Pulmonary problems
	6. Lung problems
	7. Asbestosis
	8. Asthma
	9. Emphysema
	10. Pneumonia
	11. Tuberculosis
	12. Silicosis
	13. Pneumothorax
	14. Lung cancer
	15. Broken ribs
	16. Chest injuries
	17. Chest surgeries
	18. Other lung problems
	19. Current lung problems
	20. Shortness of breath when:
		1. Walking fast uphill
		2. Walking fast on level ground
		3. Washing or dressing
		4. Working – Interferes with job

1. Coughing that produces phlegm
2. Coughing that wakes you in the morning
3. Coughing up blood
4. Wheezing
5. Wheezing that interferes with job
6. Chest pain when you breathe deeply aa. Cardiovascular or heart problems

bb. Swelling in hands or feet cc. Stroke dd. Angina ee. Heart failure ff. Heart arrhythmia gg. High blood pressure hh. Other heart problems ii. Frequent pain or tightness in your chest jj. Pain or tightness in your chest during physical activity

1. Pain or tightness in your chest that interferes with your job
2. Heart skipping or missing a beat mm. Heartburn or indigestion not related to eating

1. Do you currently take medications for any of the following? (Circle or highlight all that apply)

* 1. Breathing or lung problems c. Blood pressure
	2. Heart problems d. Seizures

1. If you have used a respirator have you had any of the following? (Circle or highlight all that apply)

* 1. Eye irritation d. General weakness or fatigue
	2. Skin allergies or rashes e. Other problems
	3. Anxiety (Specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

1. Have you ever lost vision in either eye? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

1. Do you currently have vision problems? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

1. Do you wear any of the following? (Circle or highlight all that apply)

* 1. Glasses b. Contact lenses

1. Are you color blind? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

1. Have you ever had any injury to your ears? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

1. Do you currently: (Circle or highlight all that apply)

* 1. Have difficulty hearing c. Have any other ear trouble b. Wear a hearing aid

1. Have you ever had a back injury? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

1. Do you currently have any of the following? (Circle or highlight all that apply)

|  |  |
| --- | --- |
| 1. Weakness in any of your arms, hands, legs, or feet
2. Back pain
3. Difficulty fully moving your arms or legs
4. Pain or stiffness when you lean forward or backward at the waist
5. Fully moving your head up and down
 | 1. Fully moving your head from side to side
2. Bending at your knees
3. Squatting to the ground
4. Climbing a flight of stairs or ladder with more than 25 pounds
5. Other musculoskeletal problems
 |

1. Do you have dizziness, shortness of breath, pounding in your chest, or other symptoms at high altitudes?

 Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

1. Have you ever been exposed to hazardous solvents or hazardous chemicals? Yes \_\_\_\_ No \_\_\_\_\_

* 1. If yes specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. Have you ever worked with any of the following? (Circle or highlight all that apply)

* 1. Asbestos g. Coal dust
	2. Silica h. Iron
	3. Tungsten i. Tin
	4. Cobalt j. Dusty conditions
	5. Beryllium k. Other hazardous exposure f. Aluminum

1. List any secondary jobs or businesses: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. List your previous occupations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. List your current and previous hobbies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. Have you ever been in the military? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

1. Have you ever worked on a HAZMAT team? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_