



Strategy and Tactics for Initial Company Operations

October 14 & 15, 2023
(8:00am-4:00pm each day)
in Ellsworth

NFA 00458

**Apply by
October 6, 2023**

For more info: email wmorris@smccme.edu



This 2-day course is designed to meet the needs of Company Officers (COs) responsible for managing the operations of 1 or more companies during structural firefighting operations. This course is designed to develop the management skills needed by COs to accomplish assigned tactics at structure fires.

Program Location: City of Ellsworth Fire Department, 1 City Plaza, Ellsworth, ME 04605.

Registration materials can be submitted to Anne Heinig at “MFSI - ATTN Anne Heinig, 19 Sewall Street, Brunswick, ME 04011” or to aheinig@smccme.edu.

This free program is brought to you by the National Fire Academy Fire Training Grant Program, in partnership with the Ellsworth Fire Department.



Registration Form

SMCC ID# _____ TODAY'S DATE _____

LAST NAME _____ FIRST _____ MIDDLE _____

BIRTH/OTHER NAME _____ E-MAIL _____

CELL PHONE _____ HOME PHONE _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

COUNTY _____ SOCIAL SECURITY # _____

GENDER* FEMALE MALE BIRTHDATE* _____

MINOR RELEASE FORM REQUIRED FOR STUDENTS UNDER 18 YEARS OF AGE

ETHNIC GROUP* (CHOOSE ONE) HISPANIC/LATINO NOT HISPANIC/LATINO

RACE* (CHOOSE ALL THAT APPLY) AMERICAN INDIAN OR ALASKA NATIVE ASIAN
 BLACK OR AFRICAN AMERICAN WHITE
 NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER

*OPTIONAL – THIS INFORMATION IS USED FOR REPORTING PURPOSES ONLY

YOUR REASON FOR ENROLLING DEGREE OR CERTIFICATE PERSONAL ENRICHMENT
 TRANSFER TO ANOTHER COLLEGE SKILLS FOR EMPLOYMENT OTHER

I HAVE BEEN A RESIDENT OF MAINE SINCE _____ (for non-educational purposes)
MONTH/YEAR

ARE YOU A U.S. CITIZEN? YES NO PROOF OF MAINE/US RESIDENCY REQUIRED TO QUALIFY FOR IN-STATE TUITION

DO YOU HAVE A HIGH SCHOOL DIPLOMA OR GED? YES NO

REGISTRATION YEAR _____ TERM FALL SPRING SUMMER

COURSE CODE	COURSE NUMBER	COURSE SECTION	COURSE TITLE	CREDITS	A AUDIT R REPEAT	OFFICIAL USE
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STUDENT SIGNATURE _____