



## Applications Due Friday, 28 June 2024 Limited to 18 Candidates

No exceptions will be made. MFSI reserves the right to limit the number of accepted applicants per department. Participants must adhere to all safety guidelines in place during the program.

Point of Contact: Frank Hammond Jr. Training Program Manager 207-852-8286 | fhammond@smccme.edu

# Live Fire Instructor/Live Fire Instructor-In-Charge

MFSI is partnering with Scarborough and Yarmouth Fire Departments to offer this 32 +/- hour, Maine-only certificate program.

> Orientation: 01 August 2024 Scarborough Fire Department Headquarters at 639 US-1 Thursday Evening, 1800 hours

**Time to Complete Online Modules** 02 August - 13 September @ 2359 hrs

#### **Operations: 26-29 September 2024** Yarmouth Fire HQ & Training Facility

Details Provided During Orientation In-Person Daily 0800-1700

### **Applications must include:**

- SMCC/MFSI Application Form
- SMCC/MFSI Billing Form
- Signed Permission to Participate Form
- Recommendation Letter from Fire Chief
- Proof of Fire Fighter I & II
- Proof of Fire Instructor I/II
- 3+ years of demonstrated Fire Instructor Experience

Fee: \$500/person in-state \$1000/person out-of-state

#### Send registration to:

ATTN: Anne Heinig aheinig@smccme.edu 19 Sewall Street Brunswick, ME 04011





Serving Maine Fire Training Since 1948

# Fire Chief's Permission to Participate Form

I,	, do att	est and certify that	is		
a member of	he	Fire Department and will be covered by			
the department	nt's insurance during this LF/LFIIC	program and is not presently drawing worker's	5		
compensation	benefits.				
Chief's signatu	ire				
Date					
<b>**</b> Must also provide a recommendation letter in addition to Permission to Participate Form					
Willst also	provide a recommendation letter in	raddition to remission to rarticipate rom	1		
	Application	Information	-		
The candidate	must have the following prerequisite	requirements:			
0	SMCC/MFSI Application Form				
	SMCC/MFSI Billing Form				
0	Recommendation Letter from Fire O	Thief**			
	Proof of Fire Fighter I & II				
	Proof of Fire Instructor I/II				
0	3+ years of demonstrated Fire Instru	ictor Experience			
Please submit	certificate copies with completed regis	tration forms to:			
Maine Fire Ser	vice Institute				
ATTN: Anne Heinig					
19 Sewall St. Brunswick, ME 04011					
or email ahein	ig@smccme.edu				



19 Sewall Street Brunswick, ME 04011 Website: mfsi.me.edu Phone: 207-844-2070 Fax: 207-844-2082 Email: mfsiinfo@smccme.edu A department of SMCC with statewide responsibility for firefighting training and the legislative authority to issue certification.



SMCC ID#	_TODAY'S DATE
LAST NAME	_FIRSTMIDDLE
BIRTH/OTHER NAME	_E-MAIL
CELL PHONE	HOME PHONE
MAILING ADDRESS	
CITY	_STATEZIP
COUNTY	_SOCIAL SECURITY # (last 4 digits)
GENDER* FEMALE MALE	BIRTHDATE*
ETHNIC GROUP* (CHOOSE ONE)	NIC/LATINO
RACE* AMERICAN INDIAN OR ALASKA N (CHOOSE ALL THAT APPLY) DELACK OR AFRICAN AMERICAN NATIVE HAWAIIAN OR OTHER PA	
*OPTIONAL – THIS INFORMATION IS USED FOR REPORTING PURPO	POSES ONLY
	E OR CERTIFICATE PERSONAL ENRICHMENT
	(for non-educational purposes)
	MONTH/YEAR DF OF MAINE/US RESIDENCY REQUIRED TO QUALIFY FOR IN-STATE TUITION ED? YES NO
REGISTRATION YEAR TERM	M FALL SPRING SUMMER
COURSE COURSE COURSE CODE NUMBER SECTION CO	A AUDIT OFFICIAL COURSE TITLE CREDITS R REPEAT USE
LFI/LFIIC Cum	nberland County 2024

**SOUTHERN** 

COMMUNITY COLLEGE

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#### STUDENT SIGNATURE

Southern Maine Community College is an equal-opportunity institution and employer. If you have a disability and wish to request accommodations, please contact the Director of Disability Services, Heather Jackson, at 207-741-5923 or via email at hjackson@smccme.edu. Appointments are available by Zoom and in person on both the Brunswick and South Portland campuses. Walk-in appointments are welcome. Documentation of your disability is required, but please do not let the absence of documentation prevent you from seeking accommodation.



In Service Since 1948

# **Program Billing Procedure**

In the past, MFSI has collected payment for programs and courses at the time of registration. However, in an effort to avoid delays in departments/individuals/agencies receiving their reimbursement funds for canceled programs, we will not be collecting payment for any program until after it has begun.

Please use this form to provide information about the intended payment method (whether it will be an individual or a fire department/other agency) so that MFSI can invoice the payer after the program's start date. We ask that you write legibly or type your responses.

Your application will not be considered complete without this form filled out in its entirety.

Payment method*:	Fire Department/Municipality	Personal check		
Purchase order number (if applicable):				
Payer (name/department name):				
Candidate's name (if different from payer):				
Course name:	Course location:			
Payer's address for receipt of invoice:				

#### Email address or phone number of payer (not candidate):

Please submit this form, and all other registration materials, to Anne Heinig at aheinig@smccme.edu or mail to MFSI, ATTN: Anne Heinig, 19 Sewall Street, Brunswick, ME 04011.

If you have any billing questions, please contact Nancy Russell at nrussell@smccme.edu or 207-844-2071.

\*Please note that MFSI cannot accept cash or credit card payments.

