



Maine Fire Service Institute & Southern Maine Community College

# CERTIFICATION MANUAL

Revised February 2, 2024

## NOTICE OF MUNICIPAL FIRE TRAINING

**Training Level:**

- |   |   |
|---|---|
| <input type="checkbox"/> Fire Fighter I & II    | <input type="checkbox"/> Fire Fighter I & II Upgrade    |
| <input type="checkbox"/> Fire Instructor I & II | <input type="checkbox"/> Fire Instructor I & II Upgrade |
| <input type="checkbox"/> Fire Officer I         | <input type="checkbox"/> Fire Officer I Upgrade         |
| <input type="checkbox"/> Fire Officer II        | <input type="checkbox"/> Fire Officer II Upgrade        |
| <input type="checkbox"/> Basic Fire School      | <input type="checkbox"/> Basic Fire Officer I           |
| <input type="checkbox"/> HazMat                 | <input type="checkbox"/> BPOC                           |
| <input type="checkbox"/> EVDT                   | <input type="checkbox"/> Other _____                    |

Date Submitted: \_\_\_\_\_ Approximate Start Date: \_\_\_\_\_ Approximate End Date: \_\_\_\_\_

Fire Department: \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

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

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

Daytime Phone #: \_\_\_\_\_

Evening Phone #: \_\_\_\_\_

Evening Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

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

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

**Nearest Location for Practical Skills Exam:**

- |                                    |                                  |                                    |
|------------------------------------|----------------------------------|------------------------------------|
| <input type="checkbox"/> Auburn    | <input type="checkbox"/> Caribou | <input type="checkbox"/> Bangor    |
| <input type="checkbox"/> Ellsworth | <input type="checkbox"/> Hollis  | <input type="checkbox"/> Wiscasset |
| <input type="checkbox"/> Yarmouth  |                                  |                                    |

- A. Attach a list of all instructors and all candidates.  
*Include Name, Home Address, Work & Home Phone Numbers, Complete Social Security #, and Email Address.*
- B. Attach a tentative schedule including written and end test dates.
- C. Sign and forward completed form to the MFSI Certification Office.

| For MFSI Office Use Only: |            |
|---------------------------|------------|
| Processed by _____        | Date _____ |



*A department of SMCC with statewide responsibility for firefighting training and the legislative authority to issue certification*

Maine Fire Service Institute  
19 Sewall St. Brunswick, ME 04011  
Phone: 207-844-2070 Fax: 207-844-2082