



**PRINCE GEORGE'S COUNTY  
FIRE COMMISSION**  
FIRE SERVICES BUILDING  
6820 Webster Street Landover Hills, MD 20784

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

**OFFICER CERTIFICATION**

**PRINCE GEORGE'S COUNTY VOLUNTEER FIREFIGHTERS AND RESCUE SQUADSMEN**

POSITION APPLYING FOR:

	FIRE DEPARTMENT OFFICER	<input type="checkbox"/>	E.M.S. OFFICER	<input type="checkbox"/>
CHIEF	DEPUTY CHIEF (A)	<input type="checkbox"/>	ASSISTANT CHIEF (B)	<input type="checkbox"/>
CAPTAIN	LIEUTENANT	<input type="checkbox"/>	SERGEANT	<input type="checkbox"/>

Applicant's Name: \_\_\_\_\_  
LAST FIRST MIDDLE

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

PGFD I.D. Number: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Fire or Rescue Company: \_\_\_\_\_  
NAME

Years of County Experience as:  
 F.F or EMS care Provider: \_\_\_\_\_ Sgt. or Lt.: \_\_\_\_\_ Capt.: \_\_\_\_\_ A or B Chief: \_\_\_\_\_

All Volunteer Officers must comply with the requirement for the position applied for as set forth in the Prince George's County Code, Subtitle 11, Division 7, Section 11-331 et seq. titled "Minimum Qualifications for volunteer Firefighters and Emergency Medical Service Care Providers. (CB 82-1994)

The Fire Commission requires documentation to be attached to this form with a photocopy of all required training.

Required for All Officers:

Captains and all Chiefs

All Chiefs

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Firefighter 2 Cert.   | <input type="checkbox"/> Fire Officer 1 Cert. | <input type="checkbox"/> Fire Officer 2 Cert.                    |
| <input type="checkbox"/> E.M.T. ___ Card (Current)   | <input type="checkbox"/> Instructor 1         | <input type="checkbox"/> Continuing Education (Minimum 12 hours) |
| <input type="checkbox"/> or 1 <sup>st</sup> Responder Card (before 11/94)                                      | <u>E.M.S. Officers</u>                        |  |
| <input type="checkbox"/> C.P.R. Card (Current)   | <input type="checkbox"/> EMS Officer 1 Cert.  | <input type="checkbox"/> NIMS IS 800                             |
| <input type="checkbox"/> NIMS IS 100 <input type="checkbox"/> NIMS IS 200 <input type="checkbox"/> NIMS IS 700 |   | <input type="checkbox"/> NIMS ICS 300                            |

We, the undersigned, do hereby certify that the above applicant has satisfactory met all requirements in accordance with the Laws of Prince George's County, Maryland as described above.



From: \_\_\_\_\_

Term of Office:

To: \_\_\_\_\_

\_\_\_\_\_  
 President (Print) (Sign) Date

\_\_\_\_\_  
 Secretary (Print) (Sign) Date

\_\_\_\_\_  
 Fire Chief (Print) (Sign) Date