

**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 st 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