



STATE FIRE TRAINING

Company Officer Certification Checklist



Name: _____

SFT ID Number: _____

Section 1: To Receive Task Book

PREREQUISITE

Submit verification of the following:

- | | |
|---|--------------------------------------|
| 1. OSFM certified Fire Fighter II OR rank of Officer OR appointment to the CAL FIRE rank of Fire Apparatus Engineer | COMPLETE
<input type="checkbox"/> |
|---|--------------------------------------|

EDUCATION

Submit a copy of your course completion certificate for each of the courses listed below

- | | |
|---|--------------------------------------|
| 1. Company Officer 2A: Human Resource Management | COMPLETE
<input type="checkbox"/> |
| 2. Company Officer 2B: General Administrative Functions | <input type="checkbox"/> |
| 3. Company Officer 2C: Fire Inspections and Investigations | <input type="checkbox"/> |
| 4. Company Officer 2D: All Risk Command Operations | <input type="checkbox"/> |
| 5. Company Officer 2E: Wildland Incident Operations | <input type="checkbox"/> |
| 6. Instructor I: Instructor Methodology (from Instructor I track) | <input type="checkbox"/> |

FORMS & PAYMENT

Download from the SFT website

- | | |
|--|--------------------------------------|
| 1. Complete Task Book Application form | COMPLETE
<input type="checkbox"/> |
| 2. Fee & Fee Schedule | <input type="checkbox"/> |

Section 2: To Receive Certification

CERTIFICATION CAPSTONE TASK BOOK

Submit original capstone task book to SFT (Be sure to make a copy for your records).

- | | |
|--|--------------------------------------|
| 1. Complete all job performance requirements (JPRs)
Additionally the signature verification page lists all of the evaluators that signed off in the task book | COMPLETE
<input type="checkbox"/> |
| 2. Experience
Have a minimum of two years' full-time paid or 4 years part-time paid/volunteer experience in a recognized fire agency in California as a fire fighter performing suppression duties. | <input type="checkbox"/> |
| 3. Rank – In the rank of Company Officer | <input type="checkbox"/> |
| 4. Signed by the Fire Chief or his/her authorized signatory
Signatures must be original –not stamped | <input type="checkbox"/> |