



# CONFINED SPACE RESCUE TECHNICIAN

## Request for Course Scheduling

All requests must be received **4 weeks** prior to the class start date.



By submitting this request, instructors in conjunction with hosting agencies agree to comply with all published State Fire Training policies and procedures of the California State Fire Marshal's Office.

Email: SFT.CourseScheduler@fire.ca.gov \* Ph. (916) 324-6359.

Today's Date:	Start Date:	End Date:	<b>Class Code: (SFT Use Only)</b>	
Training Facility:		Training Facility Ph. #:	Advertise In Class Schedule? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Hosting Agency:		Class Location (City):		
Contact Name:		Contact's Phone Number:	Contact's Email Address:	
Number of Squads being Taught Concurrently:		<b>Maximum: 3 Squads - Student/Instructor Ratio: 12:1</b>		
<b>SENIOR INSTRUCTOR</b>		<b>SQUAD 1</b>		
Senior Instructor:	<b>Instructor Code:</b>	Primary Instructor:	<b>Instructor Code:</b>	
Email Address:		Email Address:		
<b>SQUAD 2</b>		<b>SQUAD 3</b>		
Primary Instructor:	<b>Instructor Code:</b>	Primary Instructor:	<b>Instructor Code:</b>	
Email Address:		Email Address:		
Estimated Students:	Shift Schedule? <input type="checkbox"/> Yes <input type="checkbox"/> No	# of Shifts:	# of Students per Shift:	
<b>SHIPPING INFORMATION:</b>		<b>BILLING INFORMATION:</b>		
Agency:		Bill To Agency:		
Attn:		Attn:		
Street Address: (No PO Box)		Street Address:		
City/State/Zip Code:		City/State/Zip Code:		

⇨ FOR STATE FIRE TRAINING USE ONLY ⇩

Date Shipped:	Date Returned:	<input type="checkbox"/> MRT #: (CAL FIRE Only)		
<b>Registration</b>		<b>Unit Price</b>	<b>Quantity</b>	<b>Total Price</b>
Course Registration .....(59210-142500-21)		\$20.00		\$
Shipping/Handling Charges:			\$	8.00
revised: July 2014			<b>TOTAL DUE:</b>	\$
<b>DO NOT PAY THIS IS NOT A BILL</b>				

Return all class materials to **SFT Bookstore, 1131 S Street, Sacramento, 95811** within **15 days** of the class end date & use a carrier that can track your shipment.