Fire Apparatus Driver/Operator - Aerial Apparatus
Certification Task Book Application

Identification

Candidate: _____

SFT ID Number: _____

Mailing Address: _____

Phone (Home): _____ **Phone (Mobile):** _____

Phone (Work): _____ **Email:** _____

Agency: _____

Mailing Address: _____

How would you prefer to receive your certification task book?

☐ Email (to address listed above) ☐ US mail (to home mailing address)

Instructions

1. To apply for a certification task book, download (from the SFT website), complete and submit:
    a. The SFT Fee Schedule
    b. The certification task book application for the job function certification being pursued

2. A complete certification task book application package includes:
    a. The SFT Fee Schedule
    b. Nonrefundable payment by check or money order (payable to CAL FIRE – State Fire Training)
    c. The certification task book application
    d. All supporting and verification documentation

3. Submit the complete certification task book application package to:

State Fire Training
Attn: Cashier
PO Box 997446
Sacramento, CA 95899-7446

Prerequisites

Certification

1. Document the certifying agency, certification number, and completion date for the job function certification, or document the appropriate exception.

Certification	Certifying Agency	Certification Number	Completion Date
OSFM Fire Fighter I			

Licensing

1. Document the granting agency/institution, license/permit number, and expiration date.
2. Submit a copy of the license or permit.

License or Permit	Granting Agency/Institution	License/Permit Number	Expiration Date
Valid Class C Firefighter Endorsed driver's license (California Vehicle Code, Section 12804.11)			

Education

1. Document the completion of each required course.
2. Submit course completion certificates for the courses listed below.

Course	Completion Date (listed on certificate)
Fire Apparatus Driver/Operator 1A: Driver/Operator	
Aerial Apparatus Operations	

Rank

Must currently be in the rank (or performing in the acting capacity) of an Apparatus Driver/Operator.

Certification Exam

SFT anticipates implementation of a certification examination at a future date.

Authorities

1. Print name, sign, and date the candidate statement.
2. Ask your fire chief or the authorized designee to complete the fire chief statement.

Candidate: _____
Candidate's Printed Name

I, the undersigned, am the person applying for a [Certification Title] Certification Task Book. I hereby certify under penalty of perjury under the laws of the State of California, that all information contained in this application is true in every respect. I understand that misstatements, omissions of material facts, or falsification of information or documents may be cause for rejection.

_____ _____
Candidate's Signature Date

Candidate's Fire Chief: _____
Fire Chief's (or Authorized Designee's) Printed Name

I, the undersigned, am the person authorized to verify the candidate's application information. I hereby certify under penalty of perjury under the laws of the State of California, that all information contained in this application is true in every respect. I understand that misstatements, omissions of material facts, or falsification of information or documents may be cause for rejection.

_____ _____
Fire Chief's (or Authorized Designee's) Signature Date

Approval and Authorization

Complete Application

☐ The candidate has met all application requirements and will be issued a certification task book.

_____ _____
State Fire Training Representative's Signature Date