



**THE DEPARTMENT OF FINANCIAL SERVICES**

*Division of the State Fire Marshal*

**FIREFIGHTER MINIMUM STANDARDS GRADE RELEASE ROSTER  
BUREAU OF FIRE STANDARDS & TRAINING**

By signing this form, the students listed below give permission to the Bureau of Fire Standards and Training to release their State Examination Results to the Fire Chief, Training Officer, or Director of this training center.

Training Center: \_\_\_\_\_ Dates of Training: \_\_\_\_\_

1. This form must be submitted with the Roster of Students to the Bureau within five (5) business days of the beginning of the Minimum Standards Firefighter II curriculum.
2. This form must be typewritten or printed legibly with student names in alphabetical order.

NAME	SS NUMBER <sup>1</sup>	SIGNATURE	NAME	SS NUMBER <sup>1</sup>	SIGNATURE
01.	000-00-0000		21.	000-00-0000	
02.	000-00-0000		22.	000-00-0000	
03.	000-00-0000		23.	000-00-0000	
04.	000-00-0000		24.	000-00-0000	
05.	000-00-0000		25.	000-00-0000	
06.	000-00-0000		26.	000-00-0000	
07.	000-00-0000		27.	000-00-0000	
08.	000-00-0000		28.	000-00-0000	
09.	000-00-0000		29.	000-00-0000	
10.	000-00-0000		30.	000-00-0000	
11.	000-00-0000		31.	000-00-0000	
12.	000-00-0000		32.	000-00-0000	
13.	000-00-0000		33.	000-00-0000	
14.	000-00-0000		34.	000-00-0000	
15.	000-00-0000		35.	000-00-0000	
16.	000-00-0000		36.	000-00-0000	
17.	000-00-0000		37.	000-00-0000	
18.	000-00-0000		38.	000-00-0000	
19.	000-00-0000		39.	000-00-0000	
20.	000-00-0000		40.	000-00-0000	

<sup>1</sup> Please note that the social security number is not required; however, if you provide it, it will greatly assist us in assisting you.