## APPLICATION for HEALTH & SAFETY OFFICER CERTIFICATE OF COMPLETION

Application for Health & Safety Officer Certificate can also be completed online at: www.floridastatefirecollege.org							
Please type or print legibly.							
NAME: LAST			FIRST		MI	DATE OF BIRTH	
HOME ADDRESS:			CITY		STATE	ZIP CODE	
SOCIAL SECURITY NUMBER <sup>1</sup> (LAST FOUR NUMBERS)			E-MAIL ADD	E-MAIL ADDRESS		CONTACT PHONE NUMBER	
(2.6. ros.rrollizz.ro)							
STUDENT FCDICE #				FIREFIGHTER CERTIFICATION #			
VERIFICATION OF COURSE COMPLETION							
Attach a course completion certificate or college transcript for each of the following courses:							
Required Courses:				Prov	<u>ider</u>	<b>Dates Attended</b>	
COURAGE TO BE SAFE							
LEGAL ISSUES FOR SAFETY OFFICERS							
FLORIDA HEALTH AND SAFETY OFFICER							
APPLICANT CHECKLIST							
YES	NO						
		Attach copies of course completions or transcript.					
		Submit Form DFS-K4-2138 "Health and Safety Officer Task Book".					
☐ ☐ Attach \$30 application fee or paid \$30 application fee online.							
		SIGNATURE OF A	PPLICANT			DATE	

<sup>1</sup>USE OF SOCIAL SECURITY NUMBERS: Applicant's last four digits of the social security numbers are used by the Division of State Fire Marshal for identification purposes, to prevent misidentification, and to facilitate the approval process by the Division. The Department of Financial Services, Division of State Fire Marshal, will not disclose an applicant's last four digits of the social security number, without consent of the applicant, to anyone outside of the state agencies of Florida, except as required by law.

SUBMIT THIS APPLICATION, ALONG WITH THE REQUIRED DOCUMENTATION TO:

BUREAU OF FIRE STANDARDS AND TRAINING 11655 NW GAINESVILLE ROAD OCALA, FLORIDA 34482-1486