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| **AIRCRAFT RESCUE AND FIRE FIGHTING (ARFF) FIREFIGHTER TASK BOOK** |
| **Please type or print legibly.** |
| **PURPOSE OF THIS TASK BOOK**: This task book is an evaluative tool used to document that a candidate for an ARFF Firefighter certification has demonstrated certain requisite skills necessary to meet a specific National Fire Protection Association (NFPA) 1003 (2019 Edition) job performance requirement. Selected skill objectives in this task book are a supplement to the student learning outcomes and objectives met by successfully completing the ARFF Firefighter program curriculum. This form is incorporated by reference in Rule 67A-37.039, Florida Administrative Code (F.A.C.), and can be obtained via the Department’s website at: <https://myfloridacfo.com/division/sfm/bfst/>. |
| **EXPECTATION OF CANDIDATE**:The ARFF Firefighter candidate is solely responsible for the maintenance, completion, and submission of this task book and filling out the contact information below.  |
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| NAME: LAST | FIRST | MI | DATE OF BIRTH |
|       |       |       |       |
| HOME ADDRESS | CITY | STATE | ZIP CODE |
|       |       |       |
| EMAIL ADDRESS | PHONE NUMBER | FCDICE STUDENT ID NUMBER |
|       |       |
| DATE TASK BOOK INITIATED | DATE TASK BOOK COMPLETED |
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| **EXPECTATIONS OF EVALUATOR**: The evaluator is a direct supervisor, training officer, or person designated by Fire Chief or Agency Head who is responsible for overseeing the performance or activity of the candidate. The evaluator must be a Florida Certified ARFF Firefighter and Florida Certified Instructor. The evaluator must document first-hand observation of the requisite skills of candidate and attest by signature when task(s) has been demonstrated. The evaluator’s signature and Instructor ID number must be on this form. Upon a candidate’s written request to the Bureau’s Standards Section Supervisor, the Division shall designate an alternate evaluator independent of the candidate’s employing Fire Service Provider. This alternate evaluator must be a Florida Certified ARFF Firefighter and Florida Certified Instructor. |
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| **ARFF FIREFIGHTER** |
| **General Reference to NFPA 1003 Standard** | **Evaluator Signature****(Print & Sign Name)** | **Instructor****ID Number** | **Date** |
| **Response**  |  |  |  |
| Demonstrated the ability to effectively become familiar with the agency’s airport. |  |  |  |
| Demonstrated the ability to effectively utilize grid maps specific to the agency’s airport. |  |  |  |
| Demonstrated the ability to effectively utilize water distribution maps specific to the agency’s airport. |  |  |  |
| Demonstrated the ability to effectively navigate the agency’s airport facility using markings and lights. |  |  |  |
| Demonstrated the ability to effectively take corrective actions utilizing maps, water distribution systems, airport markings, and lights specific to the agency’s airport. |  |  |  |
| Demonstrated the ability to effectively utilize agency specific communications equipment to transmit scene size-up and implement airport emergency plans with aircraft involved. |  |  |  |
| Demonstrated the ability to effectively communicate with air traffic control in order to obtain proper clearances to a specific airport destination. |  |  |  |
| Demonstrated the ability to effectively detect an unsafe condition and implement threat reduction procedures using airport policies and procedures. |  |  |  |
| **Fire Suppression (NFPA 1003, 4.3)** |  |  |  |
| Demonstrated the ability to effectively extinguish an aircraft fuel spill fire utilizing proper personal protective equipment during foam operations. |  |  |  |
| Demonstrated the ability to effectively extinguish an aircraft fuel spill fire utilizing an ARFF vehicle turret. |  |  |  |
| Demonstrated the ability to effectively extinguish an aircraft fuel spill fire as part of a team. |  |  |  |
| Demonstrated the ability to effectively extinguish an interior aircraft fire as part of a team. |  |  |  |
| Demonstrated the ability to effectively locate and extinguish a hidden interior aircraft fire using ladders or other appropriate means. |  |  |  |
| Demonstrated the ability to effectively extinguish an aircraft engine fire as part of a team. |  |  |  |
| Demonstrated the ability to effectively extinguish a wheel assembly fire as part of a team. |  |  |  |
| Demonstrated the ability to effectively ventilate an aircraft using appropriate equipment and techniques. |  |  |  |
| Demonstrated the ability to replenish various extinguishing agents within agency specific policies and procedures. |  |  |  |
| Demonstrated the ability to effectively preserve evidence and initiate reporting procedures. |  |  |  |
| Demonstrated the ability to effectively conduct overhaul activities in support of agency specific policies and procedures. |  |  |  |
| **Rescue**  |  |  |  |
| Demonstrated the ability to effectively gain access to an aircraft via aircraft specific access points and safely egress from aircraft. |  |  |  |
| Demonstrated the ability to safely shutdown and secure an aircraft to allow for passenger egress / rescue to occur. |  |  |  |
| Demonstrated the ability to effectively remove an individual entangled within an aircraft as part of a team. |  |  |  |
| Demonstrated the ability to safely establish a triage site and begin agency specific triage protocols. |  |  |  |
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| **ATTESTATION:** I hereby declare that I have read the foregoing and the information contained in this document is, to the best of my knowledge, true and correct. I understand that falsification of this document is subject to penalty and is cause to deny or revoke this certification. |
| Signature of Candidate: Date:  |
| Printed Name of Fire Chief, Agency Head, or Designee:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: Date:  |  |