

Department of Public Safety  
Standards and Training  
Fire Standards and Certification  
4190 Aumsville Hwy SE  
Salem, OR 97317  
Phone: 503-378-2100

**NFPA FIRE INSTRUCTOR**  
NFPA Standard No. 1041, Edition of 1996  
Application for Certification  
(Revised 03/08)

DPSST Office Use Only  
LEDS Check:  ok  
Levels: \_\_\_\_\_  
\_\_\_\_\_  
Date: \_\_\_\_\_  
Reviewer Initials: \_\_\_\_\_

Name: \_\_\_\_\_ (Last) (First) (MI)      **DPSST Fire #:** \_\_\_\_\_  
**Applicant's Fire Agency:** \_\_\_\_\_      **Date of Birth:** \_\_\_\_\_

**TRAINING:** In the "Training Completed" column record all applicable DPSST certified course number(s), college/university course(s) and number(s), or the fire agency where training was completed. For all out-of-state college/university courses, provide course descriptions for evaluation. In the "Date" column record the date the training was completed. **Failure to complete this application in its entirety, including appropriate documentation of coursework and/or signatures, may result in the application being returned.**

NFPA FIRE INSTRUCTOR I		TRAINING COMPLETED	DATE
2-2	Program Management		
2-3	Instructional Development		
2-4	Instructional Delivery		
2-5	Evaluation and Testing		

- Has Applicant completed the Fire Instructor I Task Book?  Yes  No

NFPA FIRE INSTRUCTOR II		TRAINING COMPLETED	DATE
3-2	Program Management		
3-3	Instructional Development		
3-4	Instructional Delivery		
3-5	Evaluation and Testing		

- Is Applicant certified as NFPA Fire Instructor I?  Yes  No
- Has Applicant completed the Fire Instructor II Task Book?  Yes  No

NFPA FIRE INSTRUCTOR III		TRAINING COMPLETED	DATE
4-2	Program Management		
4-3	Instructional Development		
4-4	Instructional Delivery		
4-5	Evaluation and Testing		

- Is Applicant certified as NFPA Fire Instructor II?  Yes  No

**ATTEST:** The information contained in this application is true and correct to the best of my knowledge. I understand that a false or misleading statement on this document is subject to penalty under ORS 162.055, et al, and ORS 162.305 and may be cause to deny or revoke a fire service professional certification.

\_\_\_\_\_  
Signature of Applicant      \_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Agency Head or Designee      \_\_\_\_\_  
Printed name of Agency Head or Designee      \_\_\_\_\_  
Date