

NYS Division of Homeland Security and Emergency Services
 Office of Fire Prevention and Control
Proposed Fire Training/Certification Examination Schedule

Please Print ofpc.training@dohes.ny.gov

Course/Exam No.	Course No. - -	County
Course/Exam Name		Instructor's Name (Trng Only) INST#

For Office Use Only

CLASSIFICATION TRAINING/EXAM:

<input type="checkbox"/> OFPC <input checked="" type="checkbox"/> SFI <input type="checkbox"/> A/R SFI <input type="checkbox"/> MTO/MFI <input type="checkbox"/> CFI <input type="checkbox"/> OTHER	<input checked="" type="checkbox"/> STATE <input type="checkbox"/> MUNICIPAL <input type="checkbox"/> SUPPLEMENTAL <input type="checkbox"/> EXAM	MATERIAL ORDER: # WORKBOOKS For Office Use Only
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OFPC-Fire Services FPS -
 NAME OF PERSON SUBMITTING REQUEST

TITLE OF PERSON SUBMITTING REQUEST

SIGNATURE DATE
 X

Training Schedules must be received by the Office of Fire Prevention and Control (OFPC) at least 21 calendar days prior to the start of the first class. Complete all items and report any changes or cancellations immediately.

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