

# State Firefighters' and Fire Marshals' Association of Texas

Texas Volunteer Firefighters' and Fire Marshals' Certification Board

PO Box 1709 ♦ Manchaca, Texas 78652-1709 ♦ Phone: 512.454.3473

For faster processing: e-mail to [certification@sffma.org](mailto:certification@sffma.org) or fax to 512.453.1876

Effective July 1, 2020 all processing requirements must be completed within one year of receipt in the Austin office or application will become void.

SFFMA OFFICE USE ONLY
<input type="checkbox"/> DD <input type="checkbox"/> ID
PAYMENT
RECEIVED
CERTIFIED

Department Information
1) Fire Department:
2) Department's General E-mail:

Applicant Information **Fields 3, 5, and 6 are REQUIRED**	
3) Full Legal Name (including middle name, no initials):	
4) Name to Appear on Certificate (if different):	
5) Last 4 digits of SSN:	6) Birth Date:
7) Applicant's Direct E-mail:	

## CERTIFICATION COORDINATOR APPLICATION — \$25.00

THIS SECTION IS TO BE COMPLETED BY THE APPLICANT	
1 <sup>1)</sup> Total Number of Years Applicant Has Served in the Fire Service: _____	
<b>Both SFFMA Certification and Instructional Coursework must be completed in order to qualify for full certification:</b>	
1 <sup>2)</sup> SFFMA Certification: <input type="checkbox"/> Full Firefighter I <input type="checkbox"/> Full Firefighter II <input type="checkbox"/> Master Firefighter (select highest earned)    (includes examinations)    (includes examinations)	
1 <sup>3)</sup> Courses Completed: <input type="checkbox"/> Methods of Teaching <input type="checkbox"/> Instructional Techniques (select at least one) <input type="checkbox"/> NFPA 1041: Instructor I or higher <input type="checkbox"/> Other	

**Notice: "Provisional" status automatically assigned if instructional coursework documentation not submitted with application.**

### Duties of the Certification Coordinator:

- 1) Track and report training for the department
- 2) Maintain workshop attendance on a timely basis
- 3) Serve as a contact for the certification office

Through the below signature, I attest that:

- 1) I have read and understand the duties as listed;
- 2) the information contained in this application is true and correct to the best of my knowledge;
- 3) I will allow 30-60 days from receipt of the application in the Austin Office for processing; and
- 4) all application processing requirements must be completed within 12 months of receipt in the Austin Office or the application will become void.

\_\_\_\_\_  
Fire Chief Signature

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Print Name Here

\_\_\_\_\_  
Print Name Here