State Firefighters' and Fire Marshals' Association of Texas

PO Box 1709 ♦ Manchaca, Texas 78652-1709 ♦ Phone: 512.454.3473
For faster processing: e-mail to certification@sffma.org

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

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

11) Total Number of Years Applicant Has Served in the Fire Service: _____

Both SFFMA Certification and Instructional Coursework must be completed in order to qualify for full certification:

12) SFFMA Certification: (select highest earned)
- ❑ Full Firefighter I (includes examinations)
- ❑ Full Firefighter II (includes examinations)
- ❑ Master Firefighter

13) Courses Completed: (select at least one)
- ❑ Methods of Teaching
- ❑ NFPA 1041: Instructor I or higher
- ❑ Instructional Techniques
- ❑ 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
fa3) 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

Revised 03/22   Stamped, proxy, photocopied, and pencil signatures not accepted   **ALLOW 30-60 DAYS FOR PROCESSING**