



ICC Fire Plan Examiner Preparation Class Student Enrollment Form

August 18 – 21, 2008

Fire Department Contact Information:

1. Fire Agency: _____

2. Mailing Address: _____ (City) _____ (State) _____ (Zip Code)

3. Person completing form: _____ (Last) _____ (First) _____ (MI)

4. Job Title: _____ 5. Phone: _____ 6. E-mail: _____

Student Enrolling

7. _____ (Last Name) _____ (First Name) _____ (MI) _____ (Title) _____ (E-mail)

_____ (Last Name) _____ (First Name) _____ (MI) _____ (Title) _____ (E-mail)

_____ (Last Name) _____ (First Name) _____ (MI) _____ (Title) _____ (E-mail)

Lodging and Meals

The Office of State Fire Marshal (OSFM) will provide meals and lodging, if necessary, for students who are required to travel 50 or more miles to attend the Fire Plans Review training at Department of Public Safety Standards and Training (DPSST). The OSFM will only pay for lodging and meals provided by DPSST. These rooms are shared lodging with two beds per room¹. The OSFM will not reimburse for other hotel and/or meal cost other than those provided by DPSST. Fire service agencies are expected to pay for their employee's time and mileage.

Lodging:

8. Will you need overnight lodging? Yes No 9. If yes, for how many night? 1 2 3 4 5

10. Total number of employees requiring lodging? _____

Meals:

11. Will you need meals provided? Yes No 12. If yes, for how many days? 1 2 3 4

13. Total number of employees requiring meals? _____

Additional Comments:

14. Please add any additional comments pertinent to class registration:

¹ DPSST's room reservation system loads students in alphabetical order based on class roster and they are unable to accommodate individual rooms or the changing of assigned rooms.

Instructions, Enrollment Process and Cancellations

I. Instructions

These instructions are intended to answer the questions that might arise in the use of this form.

Fire Department Contact Information:

1. **Fire Agency:** Enter the name of the fire agency (i.e., Portland Fire Bureau).
2. **Mailing Address:** Enter the mailing address for the fire agency.
3. **Person Completing Form:** Enter the name of the employee responsible for completing the student enrollment form.
4. **Job Title:** Enter the job title for the employee completing the student enrollment form.
5. **Phone Number:** Enter the general phone number for the fire agency.
6. **E-mail:** Enter the e-mail address for the employee completing the student enrollment form.

Student Enrolling:

7. **Name and Title:** Enter the last name, first name, middle initial and title of student enrolling in the course.

Lodging:

8. **Overnight Lodging:** If overnight lodging is required due to travel distance of 50 or more miles, check the appropriate box.
9. **Number of Nights:** If overnight lodging is required, check the appropriate number of nights. Note: the OSFM will only provide lodging for four or five nights when a student is traveling a distance of 150 miles or more one-way.

Lodging Continued:

10. **Number of Employees Requiring Lodging:** If overnight lodging is required, enter the number of students requiring lodging.

Meals:

11. **Meals:** All students attending the training will be provided lunch at DPSST. Only complete the meals section if you are staying overnight at DPSST and are requiring breakfast and dinner in addition to lunch. Note: Students who arrive on a Sunday evening or depart on a Saturday morning will need to provide their own meals, since DPSST does not serve meals on weekends.
12. **Number of Days:** If breakfast and dinner meals are required, check the appropriate number of days.
13. **Number of Employees Requiring Meals:** If breakfast and dinner meals are required, enter the number of students requiring these meals.
14. **Additional Comments:** Type in any additional comments or questions that you have regarding the student enrollment process.

II. Enrollment Process

Upon receiving your completed Fire Plans Review Enrollment Form the OSFM will send an e-mail confirmation and any additional details. This class is provided on a first come first serve basis and enrollment will be limited to the first 25 students who complete the registration. If the class is not full two weeks prior to the class starting, the OSFM will contact fire departments that indicated that they have additional staff that they would like to send to the training for possible enrollment.

III. Cancellation Policy

Fire agencies have until two weeks prior to the training to notify the OSFM of any student cancellations. After this deadline, fire agencies are required to find replacement personnel to fill their reserved seats and notify the OSFM of designated replacement. Fire agencies that fail to meet the cancellation policy will be assessed the training cost of \$166.43 for each registered student that does not attend. To cancel enrollment or to designate a replacement staff member contact Mary Olson by e-mail mary.olson@state.or.us or telephone 503-373-1540 ext. 251.
