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

NFPA PUBLIC FIRE AND LIFE SAFETY EDUCATOR

and

NFPA PUBLIC INFORMATION OFFICER

DPSST Office Use Only LEDS Check: OK	
Levels:	
Date:	
Reviewer Initials:	

Phone:	n, OR 97317 : 503-378-2100 503-378-4600	APPLICATION	No. 1035, Edition of 2000 N FOR CERTIFICATION evised 07/08)	Date:Reviewer Initials:	_
Name:				DPSST Fire #:	
	Last	First	MI		
Applicant's Fire Agency:			Date of Birth:		
TRAINING:	In the "Training Com	nleted" column record	d all applicable DPSST ce	ertified course number(s), co	ollege/university
				t-of-state college/university	
				was completed. Failure to	
application in	its entirety, includi	ng appropriate docu	imentation of coursewor	k and/or signatures, may	result in the
application bei	ng returned.				
NFPA Public F	ire & Life Safety Edu	cator I	TRAINING CO	OMPLETED	DATE
2-1 Gener	ral Requirements				
2-2 Admi 2-3 Plann 2-4 Educa	inistration				
2-3 Plann	ing and Development				
2-4 Educa	ation				
• Has Applic		blic Fire & Life Safety	pared programs to 10-50- y Educator I Task Book? TRAINING CO	☐ Yes ☐ No	DATE
	ral Requirements	icator II	TRAINING CO		DATE
	nistration				
	ing and Development				
3-4 Educa	•				
		Public Fire & Life Safe	ety Educator I? Yes	□ No?	!
			•	ention education or instruct	ion?
	No	Total Togorian T.J. Missigned	- uuu - pu - pu - pu - pu - pu - pu - p		
	cant completed the Pu	blic Fire & Life Safet	y Educator II Task Book?	Yes No	
NFPA Public F	ire & Life Safety Edu	cator III	TRAINING CO	OMPLETED	DATE
	ral Requirements				
	inistration				
4-3 Plann	ing and Development				
4-4 Educa	ation				
• Has Applic		Public Fire & Life Safe th regularly assigned		☐ No ention education or instructi	on?

NFPA Public Information Officer		TRAINING COMPLETED	DATE					
5-1	General Requirements							
5-2	Administration							
• Has Applicant completed the Public Information Officer Task Book? ☐ 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	te					