DPSST Use Only	7		
LEDS Check: Ok	OREGON DEPARTMENT OF PUBLIC SAFETY STANDARDS AND TRAINING FIRE INSTRUCTOR APPLICATION F-9F		
Approved:			
Rejected:		(Revised 2/08)	
Date:	Failure to complete ALL fields WILL result in the rejection of this application. It will be		
By:	mailed back to	you with a letter of explanation	1.
Last Name, First Name, M.I.	Social Security Number	DPSST Fire Number	DOB
Agency Name	Phone Number	FAX Number	
Address	City, State	e, Zip	
Are you certified as an NFPA Fire I  If No, please attach your instruct	nstructor I? Yes No or experience and complete #4, #5, & #6	below.	
•		Yes No Yes No	
3. Certified course number(s) you're a (DPSST course numbers are good for 5 years)	pplying to instruct:		
(If submitted without current course nu www.oregon.gov/DPSST.)	mbers, application will be returned. Certifi	ed course numbers are available of	on our website at
IF YOU'RE <u><b>NOT</b></u> A NFPA FIRI	E INSTRUCTOR I, PLEASE COM	PLETE #4, #5, and #6 BEL0	OW
4. If you do <u>not</u> have possession of the	e curriculum, please contact the Fire Training	ng Specialist at (503) 378-2408.	
5. Total years of public safety experie	nce T	otal years of teaching experience	
6. College attended	Major	Credit Hrs/Degree	
	leteness and accuracy. I understand that falsife and is cause to deny or revoke DPSST certifications.		
	Printed Name:		

Return to:

Date:

Day Phone:

Department of Public Safety Standards and Training Fire Standards and Certification 4190 Aumsville Hwy SE, Salem, OR 97317 (503) 378-2595 (503) 378-4600 fax

NOTE: It is your responsibility, as the instructor, to **submit** the completed **roster(s)** to DPSST **within 30 days** of instructing the certified course(s).