

OHIO DEPARTMENT OF PUBLIC SAFETY
DIVISION OF EMERGENCY MEDICAL SERVICES



FIRE CHARTER APPLICATION

PROGRAM NAME	CHARTER NUMBER
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Return Complete Application to:

Ohio Department of Public Safety
Division of Emergency Medical Services
1970 West Broad Street
P.O. Box 182073
Columbus, Ohio 43218-2073



FIRE CHARTER APPLICATION

The Fire Charter Application

Each institution applying for a fire charter to provide firefighter, fire safety inspector, and instructor training is required to complete this application. The criteria used in the evaluation is based upon the Ohio Revised Code (R.C.) Section 4765.55 and rules promulgated by the Executive Director, with the advice and counsel of the Firefighter and Fire Safety Inspector Training Committee, in the provisions of Ohio Administrative Code (O.A.C.) 4765. Additionally, each institution will have to specify which classification levels that the institution wishes to teach.

The ultimate goal of a fire charter application process is to help a training program attain its own goal - providing a quality educational experience for students to become competent fire service providers and instructors. The effectiveness of a fire charter application process depends upon the fire training program's honest, self-reflective analysis of its strengths and challenges based upon the approved standards. The answers should be prepared in clear and concise language and respond to each of the questions asked. Programs that intend to offer fire service education at the secondary school level must include relevant documentation as part of their application.

Organization Prior to Preparation of the Application

The development of an application can take from three to six months; therefore a realistic and detailed timetable should be created. Although the exact organizational plan will vary from institution to institution, the following suggestions may be helpful:

1. Select an appropriate member of the staff to direct the preparation of the application.
2. Involve members of the faculty, administration, and advisory committee in application discussions.
3. Adopt a reasonable time schedule and adhere to the schedule.

Completing the Fire Charter Application

The application is divided into six sections. Each section requires the applicant to determine if the program is in compliance with the specific requirements found in R.C. and O.A.C. It is the responsibility of the applicant to submit a complete and accurate application consistent with R.C. and O.A.C. requirements.

1. A review of the following R.C. section and O.A.C. chapters will provide assistance in completing the application.
 - a. R.C. 4765.55 Fire Service Training Programs
 - b. O.A.C. 4765-20 Fire Certification
 - c. O.A.C. 4765-21 Fire Instructors
 - d. O.A.C. 4765-22 Professional Standards
 - e. O.A.C. 4765-23 Disciplinary Actions
 - f. O.A.C. 4765-24 Fire Chartering
 - g. O.A.C. 4765-25 Definitions and References
2. It is the responsibility of the applicant to submit a complete and accurate application. Should you have any questions while completing this application, please contact the Fire Education Coordinator at the Division of EMS at (800) 233-0785.
 - a. Complete all sections of the application. An incomplete application will not be processed or considered. An incomplete application will be returned to the applicant.
 - b. Review the completed application to ensure it accurately represents the proposed program.
 - c. Review and sign the Application for Fire Charter Check List.
 - d. Make a copy of the application for the Fire Charter training program files.
3. Upon receipt and review of the application a representative of the Division of EMS will contact the applicant to schedule an on-site review of the facilities, equipment, and required documentation.
4. Once a complete review of the application and an on-site review are conducted, the Executive Director shall grant or deny the Fire Charter Application.

FIRE CHARTER APPLICATION CHECKLIST

The following documents must be included as part of a complete application submission:

Appendix A

- Authorizing official statement of support for the fire charter
- Fire charter training program organizational chart
- Advisory Committee membership list
- Demonstration of adequate financial resources to operate the fire charter
- Current and signed affiliation agreements for equipment, supplies, facilities, and apparatus
- List of current fire training offsite locations approved by Executive Director
- Program Director Job Description

Appendix B

- List of all Instructors, Instructor Trainers, Skill Coordinators, and Evaluators utilized by charter, including certification numbers and expiration dates; and dates of completion for Practical Skills Evaluator and / or Live Fire Training Operations Course
- Sample copies of all instructor evaluation forms from students, peers, and program director
- List of name(s) of the charter proctor(s) for the state certification examination

Appendix C

- Student admission application, including NFPA 1001 Chapter 4 course entrance requirements
- Curriculum hours for each classification level to be offered (Form provided)
- Sample course schedule and lesson plans for each fire training level to be offered
- Description of fire testing and practical skills forms and documentation
- Copy of students' course evaluation form
- Online or distance learning documentation, if applicable
- Blank copy of certificate of course completion
- Medical Examination form

Appendix D

- Program written policies and procedures in compliance with O.A.C. 4765-24
- Program written policies and procedures for conducting live fire training (includes live fire burn plan and diagram of burn facilities)
- Program written policies and procedures for the administration of the state written certification and practical skills testing
- Program written policies and procedures for management of student and course records
- Original copy of NEW signed "Written Testing Agreement"
- Live Fire training facility Engineering Inspection

Important note: When answering questions or providing information, it is not acceptable to simply reference a policy number or name and include a policy manual with your application.

This application has been:

- Reviewed to assure all questions were answered
- Reviewed and signed by the Authorizing Official and Program Director
- Duplicated for the training program file

PROGRAM DIRECTOR NAME (Printed)	
PROGRAM DIRECTOR SIGNATURE X	DATE

SECTION I: FIRE CHARTER APPLICATION

(Please type or print legibly. Mark all that Apply)

<input type="checkbox"/> Initial Fire Charter	<input type="checkbox"/> Additional Classification	<input type="checkbox"/> Charter Renewal	<input type="checkbox"/> Charter Reinstatement
<input type="checkbox"/> Volunteer	<input type="checkbox"/> Volunteer	<input type="checkbox"/> Volunteer	<input type="checkbox"/> Volunteer
<input type="checkbox"/> FF I	<input type="checkbox"/> FF I	<input type="checkbox"/> FF I	<input type="checkbox"/> FF I
<input type="checkbox"/> FF II	<input type="checkbox"/> FF II	<input type="checkbox"/> FF II	<input type="checkbox"/> FF II
<input type="checkbox"/> FSI	<input type="checkbox"/> FSI	<input type="checkbox"/> FSI	<input type="checkbox"/> FSI
<input type="checkbox"/> HRO	<input type="checkbox"/> HRO	<input type="checkbox"/> HRO	<input type="checkbox"/> HRO
<input type="checkbox"/> Fire Instructor	<input type="checkbox"/> Fire Instructor	<input type="checkbox"/> Fire Instructor	<input type="checkbox"/> Fire Instructor
<input type="checkbox"/> FSI Instructor	<input type="checkbox"/> FSI Instructor	<input type="checkbox"/> FSI Instructor	<input type="checkbox"/> FSI Instructor
<input type="checkbox"/> Live Fire Instructor	<input type="checkbox"/> Live Fire Instructor	<input type="checkbox"/> Live Fire Instructor	<input type="checkbox"/> Live Fire Instructor

Will this fire charter be conducting a fire training program for a high school / secondary school? Yes No

If so, please provide the location(s) of the program.

If so, what fire and EMS certification course levels are offered?

Is this fire charter also an EMS Accredited training site? Yes No If yes, Accreditation #

Is this fire charter also an Approved EMS CE training site? Yes No If yes, Accreditation #

SECTION II: GENERAL PROGRAM CONTACT INFORMATION

(Please type or print legibly)

PROGRAM NAME (NOTE: Name of organization must match the name on the certificate.)			CHARTER NUMBER
MAILING ADDRESS			
CITY	STATE	ZIP	COUNTY
PHYSICAL ADDRESS (If different from mailing address)			
TELEPHONE NUMBER		FAX NUMBER	
PROGRAM E-MAIL ADDRESS			
PROGRAM WEB SITE ADDRESS			

ORGANIZATION TYPE

<input type="checkbox"/> 4-Year University / College	<input type="checkbox"/> 2-Year Community College	<input type="checkbox"/> JVS / Career Center
<input type="checkbox"/> Fire Department	<input type="checkbox"/> Private Institution	<input type="checkbox"/> Other
Is charter under any discipline, to include suspension or revocation; or under limitation by the Executive Director?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
If reinstatement, were charter and / or classification level(s) in good standing when the charter or classification expired or was voluntarily surrendered?		
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		

SECTION III: ADMINISTRATION

AUTHORIZING OFFICIAL INFORMATION

*This person has signature authority for the organization and either owns, or maintains responsibility, on behalf of the organization for the facilities, equipment, instructors, managers, and other employees of the chartered program. O.A.C. 4765-25-01			
NAME		TITLE	
MAILING ADDRESS			
CITY	STATE	ZIP	COUNTY
TELEPHONE NUMBER	FAX NUMBER		CELL PHONE NUMBER
E-MAIL ADDRESS			

PROGRAM DIRECTOR INFORMATION

NAME		TITLE	
MAILING ADDRESS			
CITY	STATE	ZIP	COUNTY
TELEPHONE NUMBER	FAX NUMBER		CELL PHONE NUMBER
E-MAIL ADDRESS			
<p>1. <i>Describe</i> the roles and responsibilities of the program director to include:</p> <ul style="list-style-type: none"> • Job description; • Ongoing review and evaluation of the program content, instructors, and students' performance; • Assignment of faculty responsibilities and scheduling of program courses; • Assuring the adequacy of all program training materials, and; • Assuring the integrity and security of the written examination and practical testing process. <p><i>Submit an organizational chart and job description under Appendix A.</i></p>			
<p>2. By what <i>methods</i> will the program director assure courses are developed under the direction of those that specialize in fire service training?</p>			
<p>3. Indicate the method by which the program director will attest to the competence of each training program graduate. Check all that apply.</p> <p> <input type="checkbox"/> Course written quizzes / examinations <input type="checkbox"/> Course practical skills assessments <input type="checkbox"/> Other _____ </p>			
<p>4. Which type of records will you utilize? <input type="checkbox"/> Paper <input type="checkbox"/> Electronic (Check both if applicable)</p>			

SECTION IV: FINANCIAL RESOURCES

5. Are there adequate financial resources for the satisfactory delivery of the fire training program?

Yes No Comment(s):

Submit documentation of adequate financial resources to operate a fire training program under Appendix A.

6. How will the training program be funded?

Tuition Only Tuition and ADM subsidy
 Tuition and program subsidy Other _____

7. What will be the total cost to a student including tuition, fees, books, uniform, and personal equipment?

<u>Course Offering(s)</u>	<u>Total Cost to Student</u>
<input type="checkbox"/> Volunteer	\$
<input type="checkbox"/> Firefighter I Transition	\$
<input type="checkbox"/> Firefighter I	\$
<input type="checkbox"/> Firefighter II Transition	\$
<input type="checkbox"/> Firefighter I and II	\$
<input type="checkbox"/> Fire Safety Inspector	\$
<input type="checkbox"/> Fire Instructor	\$
<input type="checkbox"/> Hazard Recognition Officer	\$
<input type="checkbox"/> Fire Safety Inspector Instructor	\$
<input type="checkbox"/> Live Fire Training Operations Level Instructor	\$

8. Please list the publishers' curriculum and version that will be used for each of the courses listed below.

<u>Course</u>	<u>Publisher and Version</u>
<input type="checkbox"/> Firefighter (All classifications)	
<input type="checkbox"/> Fire Safety Inspector	
<input type="checkbox"/> Hazard Recognition Officer	
<input type="checkbox"/> Fire Instructor	
<input type="checkbox"/> Fire Safety Inspector Instructor	

9. *Demonstrate that the program has adequate equipment and supply budget. Documentation must be submitted under Appendix A and include primary sources of income and expenses.*

SECTION V: FACULTY

10. Describe the methods used to select your faculty and assign staff.

11. Describe the record management system used to ensure that the training program instructors will be appropriately certified to teach at or below their level of Ohio fire certification. Describe verification process for current instructor certifications. *Submit list of Fire Instructors, Assistant Fire Instructors, Live Fire Instructors, and Fire Safety Inspector Instructors utilized by the charter, including certification numbers and expiration dates, under Appendix B.*

12. *Explain your policy on ensuring your instructors will be regularly evaluated by students, peers, and the program director. Submit student, supervisor, and peer evaluation forms under Appendix B.*
13. *Describe any continuing education opportunities available to the training program's instructors.*
14. *Describe what documentation is to be maintained in the instructor files. Documentation must be maintained for the previous and current charter cycles and be available at the time of on-site review.*

SECTION VI: FACILITIES AND RESOURCES

15. Are you providing classroom facilities and equipment which are safe, sanitary, and conducive to learning?
 Yes No Comment(s):
16. Are the classroom and laboratory facilities adequate to support the curriculum objectives established by the Executive Director?
 Yes No Comment(s):
17. Are the classroom and laboratory facilities adequate to accommodate the expected enrollment?
 Yes No Comment(s):
18. Is there an established office area available for use by the program faculty?
 Yes No Comment(s):
19. Are any of the facilities shared with other programs?
 Yes No If yes, what facilities are shared? _____
20. Has the program director visited all of the facilities, to include offsite locations, which will be utilized, to ensure that the equipment, supplies, and apparatus meet the performance objectives for the current *NFPA 1001, Standard for Fire Fighter Professional Qualifications*?
 Yes No *If yes, copies of the current, signed affiliation agreements as well as a list of all offsite locations must be included in Appendix A.*

SECTION VII: EQUIPMENT, SUPPLIES, AND LEARNING RESOURCES

21. Will sufficient equipment be available to meet the curriculum objectives established by the Executive Director?
 Yes No Comment(s):
22. Will sufficient equipment be available to accommodate the number of students enrolled?
 Yes No Comment(s):
23. Will any equipment be borrowed?
 Yes No Comment(s):
If yes, submit a list of equipment provided through written agreement to the fire training program to meet the curriculum established by the Executive Director under Appendix A.
24. Does the library / media center include current fire periodicals, training books, audio-visuals, self-instructional resources, and other references?
 Yes No Comment(s):

25. Describe the type of informational resources that will be available to students and faculty.

SECTION VIII: CURRICULUM

26. Will the fire training program comply with the Ohio curriculum by including topics in all areas approved by the Executive Director?

Yes No

27. How will the training program ensure that curriculum requirements are being met by program instructors? Check all that apply.

Course Syllabus Lesson Plans Student Workbooks
 Classroom Observation Written Examination Student Course Evaluation
 Practical Skills Assessments Student Assignments Other _____

SECTION IX: EVALUATION

28. *Describe* how the training program will use the course objective check-off sheets provided by the Division of EMS.

29. *Describe* how the training program will use the practical skill evaluation sheets provided by the Division of EMS. Who signs the practical skills sheets – Lead Instructor or Skills Evaluator?

30. *Describe* how the practical skills component of the curriculum will be integrated into the initial training course; include the student / instructor ratio for practical sessions.

31. What methods will be used by the training program to evaluate the effectiveness of the course and the teaching and learning strategies?

Students' Course Evaluation Written Quiz / Exam Results Instructor Feedback
 State Written Examination Results State Practical Skills Exam Results Advisory Board Feedback
 Practical Skill Evaluators' Feedback Course Objective Check-Off Sheets Other _____

32. Please indicate the type of documentation to be maintained in the course / student files. Check all that apply.

Course Syllabus Course Schedule Lesson Plans
 Attendance Records Copies of Quizzes / Tests Skill Sheets / Checklists
 Grade Book Objective Check-Offs Electronic Grading Printout
 Students' Course Evaluations Accident and Injury Reports Live Fire Training Documents
 Instructor Evaluations Skills Coordinator Evaluations Course I.D. Numbers

SECTION X: STUDENT SERVICES

33. *Explain* how the training program admission requirements meet those to obtain a certificate of fire training in accordance with clearly defined and published practices of the institution and consistent with R.C. 4765.55; O.A.C. 4765-20, 4765-21, and 4765-24; and NFPA 1001. Submit copy of NFPA 1582-complaint medical examination form in Appendix C.

34. *Describe* the training program written policy prohibiting discrimination in acceptance of students on the basis of age, race, color, religion, gender, sexual orientation, or national origin.

35. *Describe* how the training program will ensure all students entering into the fire training course are State certified at the pre-requisite level on the first day of the course.

36. *Explain* how the fire training program will ensure that students are not operating as a member of a response crew during class time.

SECTION XI: FAIR PRACTICES

37. Indicate which of the following requirements have written policies made available to students:

- Admission requirements
- Prohibition against discrimination towards students
- Refunds of tuition payments
- Criteria for successful completion of each training course
- Costs associated with the training program including tuition, materials, and fees
- Methods for determining grades
- Information regarding schedule, content, and objectives
- Criteria for successful completion of each component of curriculum
- Attendance requirements and procedures to make-up work for missed course hours
- Grounds for dismissal from the course
- Disciplinary and grievance procedures including mechanism for appeals
- Policies and procedures for voluntary student withdrawal from the course
- Requirements or restrictions regarding student attire or appearance
- Prohibition against assigning students to emergency response duties during scheduled training hours
- Procedures for reporting accidents and injuries sustained during a course
- Procedures for conducting live fire training evolutions that meet NFPA 1403, *Standard on Live Fire Training Evolutions*

Submit documentation of required written policies under Appendix D.

38. Indicate which of the following requirements have written policies made available to fire instructor and fire safety inspector instructor students, when conducting online and / or distance education courses:

- Admission requirements
- Minimum requirements for technological needs for the student to participate in online and / or distance education courses
- Technology support to students enrolled in online and distance education courses
- Security parameters protecting students' financial and personal information
- Procedures for administration of online and / or distance education courses
- Procedures identifying how the student will have weekly access to the instructor
- Method to transition from online or distance education course into a traditional classroom course

Submit documentation of required written policies under Appendix D.

SECTION XII: EXAMINATION PRACTICES

39. The chartered program shall meet all requirements for administration of the practical skills examinations and written examinations in accordance with O.A.C. 4765-24, to include the following:

- Ensures the integrity and security of all practical and written examinations
- Ensures a current signed Written Testing Agreement with the Executive Director is on file with the Division of EMS

- Ensures each proctor has received directions in the state examination process and is familiar with all registration, security, and access procedures for testing
- Ensures that only qualified candidates sit for the examinations

- Ensures that the program director, or their designated proctor, shall be present in the examination room for the duration of the examination
- Ensures that no firefighter, instructor, or EMS instructor shall proctor or be present during the examination unless the individual is sitting for the examination as part of the course requirements
- Ensures no unauthorized electronic devices including, but not limited to: personal laptops, cell phones, flash drives, and tablets shall be permitted in the examination room or used during the examination process
- Ensures the responsibility for the administration and set up of the practical skills examination
- Ensures the practical skill stations are set up prior to the scheduled examination time
- Ensures the program director or a designated skills coordinator supervises the practical examinations
- Ensures that appropriately certified and trained instructors conduct the evaluations during practical skill examinations
- Ensures that the lead instructors are not permitted to evaluate any of their students
- Ensures the safety of students by providing equipment, supplies, and apparatus that meets NFPA performance objectives for all practical examinations
- Ensures candidates are not permitted to directly observe other candidates during the practical skills examination
- Ensures that any potential compromise of the practical or written examination process is immediately reported to the Executive Director

40. *Describe* how the fire charter program ensures that eligible students receive adequate notice of all practical and written examinations.

41. *Describe* the procedures and processes followed by the chartered program to maintain the examination and testing records for all students.

42. *Describe* the chartered program's record retention policy for maintenance of student training records.

43. What are the chartered program's policies regarding notifying candidates of their written test scores, including notification method, timeliness, and who may receive the scores?

44. *Describe* how the chartered program ensures that the facilities and equipment at the test locations are adequate for completion of the job performance requirements, requisite knowledge, requisite skills, and objectives to be tested.

45. *Describe* the chartered program's policies for ensuring that there is adequate space between persons taking written and / or Web-based course and certification exams.

46. *Explain* the chartered program's policy that establishes the minimum requirements for equipment and apparatus to be safely utilized for practical skills testing, and when required, have equipment and facilities to adequately test all live fire training requirements. Policy should include statement verifying annual testing of all equipment utilized during training (ladders, hose, pump test, SCBAs, and breathing air compressor).

47. *Describe* how the chartered program will ensure that adequate supervision is provided to maintain security and safety during practical and written certification tests.
48. *Describe* the chartered program’s policies regarding persons leaving the supervised testing area during the practical and written certification exams.
49. *Describe* the chartered program’s policy to ensure that qualified persons are chosen to proctor the written and / or Web-based knowledge exams and what training each have received in the course management and state examination process.
50. *Describe* the charter program’s policy on training persons utilized as practical skills evaluators. The agency must have a procedure in place to qualify individuals who administer or evaluate knowledge, skills, or abilities in accordance with rule 4765-24-21 of the O.A.C.
51. *Explain* how practical skills evaluators receive instructions regarding the evaluation process.
52. *Describe* how the charter ensures that the persons used as evaluators have not been the instructor for the specific training of the candidate in the skills being examined or evaluated. The agency must have a policy in place that prohibits an instructor from teaching and evaluating the same skills.

SECTION XIII: LIVE FIRE TRAINING

53. *Summarize* the procedures that the charter program will utilize to ensure *NFPA standard 1403, Standard for Live Fire Training Evolutions*, will be used for all live fire training. Documentation must be provided, including a diagram of the burn building / facility. *Submit documentation of required written policies, including diagrams, under Appendix D.*
54. *Describe* how the charter program will document that a fire instructor or assistant fire instructor utilized in instruction of any live fire evolution has completed the “Live Fire Training Operations Course” in accordance with O.A.C. 4765-21-03. (For new instructors after April 7, 2014)
55. Does the charter program have a live burn structure at your facility? Yes No
 If so, please describe the type of facility (i.e., fixed gas-fired, fixed non-gas-fired, containers, mobile lab, etc.) Submit documentation of most recent inspection by a professional engineer in Appendix D.
56. Do you have an affiliation agreement with another institution that does have a live burn structure? Yes No
 If so, please give the location and describe the type of facility (i.e., fixed gas-fired, fixed non-gas-fired, containers, mobile lab, etc.)

SECTION XIV: FIRE ADVISORY COMMITTEE

57. The charter program shall provide a listing of its advisory committee; include names, positions, fire department affiliation and / or organization, mailing addresses, e-mail addresses, and business phone numbers. *Submit documentation of advisory committee under Appendix A.*

58. *Explain* how charter will ensure proper documentation of advisory committee meeting minutes to include the agenda, discussion of issues, and the attendance record for each meeting that is conducted in accordance with O.A.C. 4765-24-03.

59. *Explain* how all affected associations and organizations within the charter program's jurisdiction are represented by the advisory committee. If not represented, describe how all affected groups within the charter program's jurisdiction have access to the agency in such a way that their views, opinions, and desires may be expressed and receive fair consideration.

I attest that all information included in this application is true and accurate to the best of my knowledge. I understand a false statement on this application could constitute falsification under Section 2921.13 of the R.C. and is a misdemeanor of the first degree. Any false statement may be grounds for denial, suspension, revocation, or other disciplinary action taken against this charter or classification level. As the Authorizing Official, I recognize that I am responsible for ensuring that all laws and rules pertaining to this charter (including any duties delegated to the Program Director) are followed. I agree to provide a copy of this application to the Program Director listed on this application, as well as any new Program Director who may be assigned during this charter period. I understand I must maintain records relating to the charter requirements and such records are subject to audit by the Division of EMS. I hereby give permission to the Ohio Department of Public Safety, Division of EMS to verify any of the information contained herein.

NAME OF AUTHORIZING OFFICIAL (PRINTED)

SIGNATURE OF AUTHORIZING OFFICIAL

X

DATE

READ AND RECEIVED

NAME OF PROGRAM DIRECTOR (PRINTED)

SIGNATURE OF PROGRAM DIRECTOR

X

DATE

APPENDIX A

In order for a Fire Charter Application to be deemed complete and to be considered by the Executive Director, **all** of the documentation listed on this page shall be submitted to the Division of EMS with the application. Where provided, please use the templates in completing your application.

- Authorizing Official statement of support for the fire charter
- Charter training program organizational chart
- Advisory Committee membership list
- Demonstration of adequate financial resources to operate the fire charter
- Current and signed affiliation agreements for equipment, supplies, facilities, and apparatus
- List of current fire training offsite locations approved by Executive Director
- Program Director Job Description

FIRE CHARTER ADVISORY COMMITTEE MEMBERSHIP

In accordance with O.A.C. 4765-24-03, the Advisory Committee shall include a minimum of five people, to include the program director, fire chiefs, instructors, and others from the fire community. (Copy page, if additional space is needed.)

NAME	POSITION
ADDRESS	AFFILIATION
E-MAIL ADDRESS	BUSINESS TELEPHONE NUMBER
CERTIFICATION LEVEL <input type="checkbox"/> Firefighter <input type="checkbox"/> FSI <input type="checkbox"/> Fire Inst. <input type="checkbox"/> FSI Inst. <input type="checkbox"/> Other	

NAME	POSITION
ADDRESS	AFFILIATION
E-MAIL ADDRESS	BUSINESS TELEPHONE NUMBER
CERTIFICATION LEVEL <input type="checkbox"/> Firefighter <input type="checkbox"/> FSI <input type="checkbox"/> Fire Inst. <input type="checkbox"/> FSI Inst. <input type="checkbox"/> Other	

NAME	POSITION
ADDRESS	AFFILIATION
E-MAIL ADDRESS	BUSINESS TELEPHONE NUMBER
CERTIFICATION LEVEL <input type="checkbox"/> Firefighter <input type="checkbox"/> FSI <input type="checkbox"/> Fire Inst. <input type="checkbox"/> FSI Inst. <input type="checkbox"/> Other	

NAME	POSITION
ADDRESS	AFFILIATION
E-MAIL ADDRESS	BUSINESS TELEPHONE NUMBER
CERTIFICATION LEVEL <input type="checkbox"/> Firefighter <input type="checkbox"/> FSI <input type="checkbox"/> Fire Inst. <input type="checkbox"/> FSI Inst. <input type="checkbox"/> Other	

NAME	POSITION
ADDRESS	AFFILIATION
E-MAIL ADDRESS	BUSINESS TELEPHONE NUMBER
CERTIFICATION LEVEL <input type="checkbox"/> Firefighter <input type="checkbox"/> FSI <input type="checkbox"/> Fire Inst. <input type="checkbox"/> FSI Inst. <input type="checkbox"/> Other	

NAME	POSITION
ADDRESS	AFFILIATION
E-MAIL ADDRESS	BUSINESS TELEPHONE NUMBER
CERTIFICATION LEVEL <input type="checkbox"/> Firefighter <input type="checkbox"/> FSI <input type="checkbox"/> Fire Inst. <input type="checkbox"/> FSI Inst. <input type="checkbox"/> Other	

APPENDIX B

In order for a Fire Charter Application to be deemed complete and to be considered by the Executive Director, ***all*** of the documentation listed on this page shall be submitted to the Division of EMS with the application. Where provided, please use the templates in completing your application.

- List of all Instructors, Instructor Trainers, Skill Coordinators, and Practical Skills Evaluators utilized by the charter, including certification numbers and expiration dates; and dates of completion for Practical Skills Evaluator and / or Live Fire Training Operations Course
- Sample copies of all instructor evaluation forms from students, peers, and program director
- List of name(s) of the charter proctor(s) for the state certification examination

INSTRUCTOR ROSTER

List the instructors that will be utilized by the charter program. (Copy next page, if additional space is needed.)

Has the program director verified all the instructors utilized have a current and valid Ohio certificate to practice and certificate to teach that are not under disciplinary action by the Executive Director?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the program director verified each instructor trainer meets the requirements of O.A.C. 4765-24-17?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the program director verified each skills coordinator and practical skills evaluator has taken the "Practical Skills Evaluator Course?"	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the program director verified each live fire instructor has taken the "Live Fire Training Operations Course?" (For new instructors after April 7, 2014)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

NAME	NAME
CERTIFICATION NUMBER	CERTIFICATION NUMBER
EXPIRATION DATE	EXPIRATION DATE
<input type="checkbox"/> Asst. Fire Instructor <input type="checkbox"/> Fire Instructor <input type="checkbox"/> FSI Instructor <input type="checkbox"/> Live Fire Instructor	<input type="checkbox"/> Asst. Fire Instructor <input type="checkbox"/> Fire Instructor <input type="checkbox"/> FSI Instructor <input type="checkbox"/> Live Fire Instructor
<input type="checkbox"/> Fire Instructor Trainer <input type="checkbox"/> FSI Instructor Trainer <input type="checkbox"/> Live Fire Instructor Trainer	<input type="checkbox"/> Fire Instructor Trainer <input type="checkbox"/> FSI Instructor Trainer <input type="checkbox"/> Live Fire Instructor Trainer
<input type="checkbox"/> Practical Skills Evaluator <input type="checkbox"/> Skills Coordinator	<input type="checkbox"/> Practical Skills Evaluator <input type="checkbox"/> Skills Coordinator
PRACTICAL SKILLS EVALUATOR TRAINING COURSE COMPLETION DATE	PRACTICAL SKILLS EVALUATOR TRAINING COURSE COMPLETION DATE
LIVE FIRE TRAINING OPERATIONS COURSE COMPLETION DATE	LIVE FIRE TRAINING OPERATIONS COURSE COMPLETION DATE

NAME	NAME
CERTIFICATION NUMBER	CERTIFICATION NUMBER
EXPIRATION DATE	EXPIRATION DATE
<input type="checkbox"/> Asst. Fire Instructor <input type="checkbox"/> Fire Instructor <input type="checkbox"/> FSI Instructor <input type="checkbox"/> Live Fire Instructor	<input type="checkbox"/> Asst. Fire Instructor <input type="checkbox"/> Fire Instructor <input type="checkbox"/> FSI Instructor <input type="checkbox"/> Live Fire Instructor
<input type="checkbox"/> Fire Instructor Trainer <input type="checkbox"/> FSI Instructor Trainer <input type="checkbox"/> Live Fire Instructor Trainer	<input type="checkbox"/> Fire Instructor Trainer <input type="checkbox"/> FSI Instructor Trainer <input type="checkbox"/> Live Fire Instructor Trainer
<input type="checkbox"/> Practical Skills Evaluator <input type="checkbox"/> Skills Coordinator	<input type="checkbox"/> Practical Skills Evaluator <input type="checkbox"/> Skills Coordinator
PRACTICAL SKILLS EVALUATOR TRAINING COURSE COMPLETION DATE	PRACTICAL SKILLS EVALUATOR TRAINING COURSE COMPLETION DATE
LIVE FIRE TRAINING OPERATIONS COURSE COMPLETION DATE	LIVE FIRE TRAINING OPERATIONS COURSE COMPLETION DATE

NAME	NAME
CERTIFICATION NUMBER	CERTIFICATION NUMBER
EXPIRATION DATE	EXPIRATION DATE
<input type="checkbox"/> Asst. Fire Instructor <input type="checkbox"/> Fire Instructor <input type="checkbox"/> FSI Instructor <input type="checkbox"/> Live Fire Instructor	<input type="checkbox"/> Asst. Fire Instructor <input type="checkbox"/> Fire Instructor <input type="checkbox"/> FSI Instructor <input type="checkbox"/> Live Fire Instructor
<input type="checkbox"/> Fire Instructor Trainer <input type="checkbox"/> FSI Instructor Trainer <input type="checkbox"/> Live Fire Instructor Trainer	<input type="checkbox"/> Fire Instructor Trainer <input type="checkbox"/> FSI Instructor Trainer <input type="checkbox"/> Live Fire Instructor Trainer
<input type="checkbox"/> Practical Skills Evaluator <input type="checkbox"/> Skills Coordinator	<input type="checkbox"/> Practical Skills Evaluator <input type="checkbox"/> Skills Coordinator
PRACTICAL SKILLS EVALUATOR TRAINING COURSE COMPLETION DATE	PRACTICAL SKILLS EVALUATOR TRAINING COURSE COMPLETION DATE
LIVE FIRE TRAINING OPERATIONS COURSE COMPLETION DATE	LIVE FIRE TRAINING OPERATIONS COURSE COMPLETION DATE

NAME	NAME
CERTIFICATION NUMBER	CERTIFICATION NUMBER
EXPIRATION DATE	EXPIRATION DATE
<input type="checkbox"/> Asst. Fire Instructor <input type="checkbox"/> Fire Instructor <input type="checkbox"/> FSI Instructor <input type="checkbox"/> Live Fire Instructor	<input type="checkbox"/> Asst. Fire Instructor <input type="checkbox"/> Fire Instructor <input type="checkbox"/> FSI Instructor <input type="checkbox"/> Live Fire Instructor
<input type="checkbox"/> Fire Instructor Trainer <input type="checkbox"/> FSI Instructor Trainer <input type="checkbox"/> Live Fire Instructor Trainer	<input type="checkbox"/> Fire Instructor Trainer <input type="checkbox"/> FSI Instructor Trainer <input type="checkbox"/> Live Fire Instructor Trainer
<input type="checkbox"/> Practical Skills Evaluator <input type="checkbox"/> Skills Coordinator	<input type="checkbox"/> Practical Skills Evaluator <input type="checkbox"/> Skills Coordinator
PRACTICAL SKILLS EVALUATOR TRAINING COURSE COMPLETION DATE	PRACTICAL SKILLS EVALUATOR TRAINING COURSE COMPLETION DATE
LIVE FIRE TRAINING OPERATIONS COURSE COMPLETION DATE	LIVE FIRE TRAINING OPERATIONS COURSE COMPLETION DATE

NAME	NAME
CERTIFICATION NUMBER	CERTIFICATION NUMBER
EXPIRATION DATE	EXPIRATION DATE
<input type="checkbox"/> Asst. Fire Instructor <input type="checkbox"/> Fire Instructor <input type="checkbox"/> FSI Instructor <input type="checkbox"/> Live Fire Instructor	<input type="checkbox"/> Asst. Fire Instructor <input type="checkbox"/> Fire Instructor <input type="checkbox"/> FSI Instructor <input type="checkbox"/> Live Fire Instructor
<input type="checkbox"/> Fire Instructor Trainer <input type="checkbox"/> FSI Instructor Trainer <input type="checkbox"/> Live Fire Instructor Trainer	<input type="checkbox"/> Fire Instructor Trainer <input type="checkbox"/> FSI Instructor Trainer <input type="checkbox"/> Live Fire Instructor Trainer
<input type="checkbox"/> Practical Skills Evaluator <input type="checkbox"/> Skills Coordinator	<input type="checkbox"/> Practical Skills Evaluator <input type="checkbox"/> Skills Coordinator
PRACTICAL SKILLS EVALUATOR TRAINING COURSE COMPLETION DATE	PRACTICAL SKILLS EVALUATOR TRAINING COURSE COMPLETION DATE
LIVE FIRE TRAINING OPERATIONS COURSE COMPLETION DATE	LIVE FIRE TRAINING OPERATIONS COURSE COMPLETION DATE

FIRE CHARTER PROCTORS FOR WRITTEN CERTIFICATION EXAM

List the proctors that will be utilized by the charter program. (Copy page, if additional space is needed.)

NAME	NAME
MAILING ADDRESS	MAILING ADDRESS
CITY, STATE, ZIP	CITY, STATE, ZIP
TELEPHONE NUMBER	TELEPHONE NUMBER

NAME	NAME
MAILING ADDRESS	MAILING ADDRESS
CITY, STATE, ZIP	CITY, STATE, ZIP
TELEPHONE NUMBER	TELEPHONE NUMBER

NAME	NAME
MAILING ADDRESS	MAILING ADDRESS
CITY, STATE, ZIP	CITY, STATE, ZIP
TELEPHONE NUMBER	TELEPHONE NUMBER

NAME	NAME
MAILING ADDRESS	MAILING ADDRESS
CITY, STATE, ZIP	CITY, STATE, ZIP
TELEPHONE NUMBER	TELEPHONE NUMBER

NAME	NAME
MAILING ADDRESS	MAILING ADDRESS
CITY, STATE, ZIP	CITY, STATE, ZIP
TELEPHONE NUMBER	TELEPHONE NUMBER

APPENDIX C

In order for a Fire Charter Application to be deemed complete and to be considered by the Executive Director, ***all*** of the documentation listed on this page shall be submitted to the Division of EMS with the application. Where provided, please use the templates in completing your application.

- Student admission application, including NFPA 1001 Chapter 4 course entrance requirements and program educational testing requirements
- Curriculum hours for each classification level to be offered (Form provided)
- Sample course schedule and lesson plans for each fire training level to be offered
- Description of fire testing and practical skills forms and documentation
- Copy of students' course evaluation form
- Online or distance learning documentation, if applicable
- Blank copy of certificate of course completion
- Medical Examination form

Please provide charter program forms and documentation only. DO NOT include any Division of Emergency Medical Services forms or curriculum publisher documents.

FIREFIGHTER AND FIRE SAFETY INSPECTOR CURRICULUM HOURS

Volunteer Firefighter Curriculum

Enter the number of hours devoted to each topic by your program curriculum.

NFPA 1001 Standard	TOPIC	RECOMMENDED TRAINING HOURS	PROGRAM TRAINING HOURS
5.1.1	Fire Dept. Organization & Safety	2	
5.1.2	Fire Dept. Organization & Safety	2	
5.3.1	Personal Protective Equipment / SCBA*	5	
5.3.2	Response Safety	1	
5.3.3	Scene Safety	1	
5.3.4	Forcible Entry	3	
5.3.6	Ground Ladders	4	
5.3.9	Search & Rescue	3	
5.3.11	Horizontal Ventilation	4	
5.3.13	Overhaul	1	
5.3.14	Salvage	2	
5.3.15	Water Supplies	3	
5.3.16	Fire Extinguishers	2	
5.3.18	Secure building utilities	1	
5.3.20	Ropes & Knots	2	
Total Course Hours (Must be 36 hours per R.C.)		36 Hours	

*Personal Protective Equipment / Self-Contained Breathing Apparatus

Firefighter I Curriculum

Enter the number of hours devoted to each topic by your program curriculum.

NFPA 1001 Standard	TOPIC	RECOMMENDED TRAINING HOURS	PROGRAM TRAINING HOURS
5.1.1	Fire Dept. Organization & Safety	3	
5.1.2	Fire Dept. Organization & Safety	3	
5.2.1	Fire Dept. Communications	1	
5.2.2	Fire Dept. Communications	1	
5.2.3	Fire Dept. Communications	1	
5.2.4	MAYDAY	1	
5.3.1	Personal Protective Equipment / SCBA	10	
5.3.2	Response Safety	2	
5.3.3	Scene Safety	1	
5.3.4	Forcible Entry	7	
5.3.5	Exit Hazard	6	
5.3.6	Ground Ladders	10	
5.3.7	Fire Control - Vehicle Fires	5	
5.3.8	Fire Control- Class A stacked materials	4	
5.3.9	Search & Rescue	8	
5.3.10	Fire Control - Interior structure fire	14	
5.3.11	Horizontal Ventilation	8	
5.3.12	Vertical Ventilation	8	
5.3.13	Overhaul	2	
5.3.14	Salvage	4	
5.3.15	Water Supplies	7	
5.3.16	Fire Extinguishers	4	
5.3.17	Scene Lighting	1	
5.3.18	Secure building utilities	3	
5.3.19	Fire Control-Ground cover	4	
5.3.20	Ropes & Knots	4	
5.5.1	Clean & Check Equipment	1	
5.5.2	Clean & Check Fire Hose	1	
Total Course Hours		124 Hours	

Firefighter I & II Curriculum

Enter the number of hours devoted to each topic by your program curriculum.

NFPA 1001 Standard	TOPIC	RECOMMENDED TRAINING HOURS	PROGRAM TRAINING HOURS
5.1.1	Fire Dept. Organization & Safety	3	
5.1.2	Fire Dept. Organization & Safety	3	
5.2.1	Fire Dept. Communications	1	
5.2.2	Fire Dept. Communications	1	
5.2.3	Fire Dept. Communications	1	
5.2.4	MAYDAY	1	
5.3.1	Personal Protective Equipment / SCBA	10	
5.3.2	Response Safety	2	
5.3.3	Scene Safety	1	
5.3.4	Forcible Entry	7	
5.3.5	Exit Hazard	6	
5.3.6	Ground Ladders	10	
5.3.7	Fire Control - Vehicle Fires	5	
5.3.8	Fire Control- Class A stacked materials	4	
5.3.9	Search & Rescue	8	
5.3.10	Fire Control - Interior structure fire	14	
5.3.11	Horizontal Ventilation	8	
5.3.12	Vertical Ventilation	8	
5.3.13	Overhaul	2	
5.3.14	Salvage	4	
5.3.15	Water Supplies	7	
5.3.16	Fire Extinguishers	4	
5.3.17	Scene Lighting	1	
5.3.18	Secure building utilities	3	
5.3.19	Fire Control-Ground cover	4	
5.3.20	Ropes & Knots	4	
5.5.1	Clean & Check Equipment	1	
5.5.2	Clean & Check Fire Hose	1	
6.1.1	Incident Command	5	
6.2.1	Incident Reports	3	
6.2.2	Communications	4	
6.3.1	Fire Control - Ignitable Liquids	12	
6.3.2	Fire Control - Interior structure fire	20	
6.3.3	Fire Control - Flammable Gas	8	
6.3.4	Fire Cause & Origin	4	
6.4.1	Extricate a victim	16	
6.4.2	Assist Rescue Teams	3	
6.5.1	Perform Fire Safety Survey	3	
6.5.2	Present Fire Safety Information	2	
6.5.3	Pre-incident Survey	4	
6.5.4	Equipment Maintenance	4	
6.5.5	Hose Testing	4	
4.2.1	Recognition and Identification	2	
4.3.1	Initiate Protective Actions	2	
4.4.1	Notification	2	
5.2.1	Identify Potential Hazards	2	
5.3.1	Identify Action Options	2	
5.4.1	Action Plan Implementation	6	
5.5.1	Emergency Decontamination	6	
5.6.1	Progress Evaluation and Reporting	2	
OAC 4765-20-02	Life Safety Initiatives	4	
	Total Course Hours	244 Hours	

Fire Safety Inspector Curriculum

Enter the number of hours devoted to each topic by your program curriculum.

NFPA 1031 Standard	TOPIC	RECOMMENDED TRAINING HOURS	PROGRAM TRAINING HOURS
4.2.1	Prepare inspection reports	2	
4.2.2	Recognize the need for a permit	2	
4.2.3	Recognize the need for plan review	1	
4.2.4	Investigate common complaints	1	
4.2.5	Identify the applicable code or standard	2	
4.2.6	Participate in legal proceedings	4	
4.3.1	Identify the occupancy classification of a single-use occupancy	1	
4.3.2	Compute the allowable occupant load of a single-use occupancy or portion	1	
4.3.3	Inspect means of egress elements	2	
4.3.4	Verify the type of construction for an addition or remodeling project	1	
4.3.5	Determine the operational readiness of existing fixed fire suppression	3	
4.3.6	Determine the operational readiness of existing fire detection and alarm	3	
4.3.7	Determine the operational readiness of existing portable fire extinguishers	3	
4.3.8	Recognize hazardous conditions involving equipment, processes, and	2	
4.3.9	Compare an approved plan to an existing fire protection system	4	
4.3.10	Verify that emergency planning and preparedness measures are in place	2	
4.3.11	Inspect emergency access for an existing site	1	
4.3.12	Verify code compliance for incidental storage, handling, and use of	1	
4.3.13	Verify code compliance for incidental storage, handling, and use of	1	
4.3.14	Recognize a hazardous fire growth potential in a building or space	2	
4.3.15	Determine code compliance	1	
4.3.16	Verify fire flows for a site	1	
5.2.1	Process a permit application	2	
5.2.2	Process a plan review application	1	
5.2.3	Investigate complex complaints	2	
5.2.4	Recommend modifications to the adopted codes and standards of the	1	
5.2.5	Recommend policies and procedures for the delivery of	2	
5.3.1	Compute the maximum allowable occupant load of a multi-use building	1	
5.3.2	Identify the occupancy classifications of a mixed-use building,	1	
5.3.3	Evaluate a building's area, height, occupancy classification, and	1	
5.3.4	Evaluate fire protection systems and equipment provided for life safety and	3	
5.3.5	Analyze the egress elements of a building or portion of a building	2	
5.3.6	Evaluate hazardous conditions involving equipment, processes, and	2	
5.3.7	Evaluate emergency planning and preparedness procedures,	1	
5.3.8	Verify code compliance for storage, handling, and use of flammable and	4	
5.3.9	Evaluate code compliance for the storage, handling, and use of hazardous	4	
5.3.10	Determine fire growth potential in a building or space	2	
5.3.11	Verify compliance with construction documents	1	
5.3.12	Verify code compliance of heating, ventilation, air conditioning, and other	1	
5.4.1	Classify the occupancy	1	
5.4.2	Compute the maximum allowable occupant load	1	
5.4.3	Review the proposed installation of fire protection systems	1	
5.4.4	Review the installation of fire protection systems	1	
5.4.5	Verify that means of egress elements are provided	3	
5.4.6	Verify the construction type of a building or portion thereof	1	
	Total Course Hours	80 Hours	

Fire Instructor and Fire Safety Inspector Instructor Curriculum

Please refer to the [Ohio Fire and EMS Instructor Curriculum](http://www.ems.ohio.gov) located on the Division of EMS Web site (www.ems.ohio.gov) regarding Fire Instructor and Fire Safety Inspector Instructor curriculum requirements.

APPENDIX D

In order for a Fire Charter Application to be deemed complete and to be considered by the Executive Director, ***all*** of the documentation listed on this page shall be submitted to the Division of EMS with the application. Where provided, please use the templates in completing your application.

- Program written policies and procedures in compliance with O.A.C. 4765-24
- Program written policies and procedures for conducting live fire training (includes live fire burn plan and diagram of burn facilities)
- Program written policies and procedures for the administration of the state practical skills and written examinations
- Program written policies and procedures for management of student, course, and instructor records
- Original copy of NEW signed "Written Testing Agreement"
- Live Fire training facility Engineering Inspection

Please provide charter program forms and documentation only. DO NOT include any Division of Emergency Medical Services forms.