



**AFSC APPLICATION FOR CERTIFICATION
STATE OF ALASKA
DEPARTMENT of PUBLIC SAFETY
FIRE STANDARDS COUNCIL**



APPLICATION TYPE

<input type="checkbox"/> New	<input type="checkbox"/> Retest	<input type="checkbox"/> Reciprocity	<input type="checkbox"/> Equivalency Challenge	<input type="checkbox"/> Grandfather
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APPLICATION LEVEL

<input type="checkbox"/> Firefighter -	<input type="checkbox"/> Hazardous Materials-	<input type="checkbox"/> Fire Officer-
<input type="checkbox"/> Instructor-	<input type="checkbox"/> Fire Apparatus-	<input type="checkbox"/> Land-Based Marine FF
<input type="checkbox"/> Fire Investigator	<input type="checkbox"/> AK Fire Investigator Tech (AKFIT)	<input type="checkbox"/> Airport Firefighter
<input type="checkbox"/> Rapid Intervention Crews	<input type="checkbox"/> Rural Fire Protection-	<input type="checkbox"/> Other

-- REQUIRED -- PERSONAL INFORMATION ***PRINT CLEARLY*******

First Name:	Middle Initial:	Last Name:
Cell/Contact Phone:		DOB:
<i>VALID EMAIL ADDRESS FOR AFSC CERTIFICATE ISSUANCE</i>		
ID Number*:	Valid Email Address:	
<i>*The ID# is the last four numbers of the applicant's Social Security Number for AFSC, IFSAC, & ProBoard tracking.</i>		

-- REQUIRED -- DEPARTMENT OR EMPLOYER INFORMATION

Department/Employer Name:

-- OPTIONAL -- FIRE FIGHTER I & II PIN PURCHASE

<i>To request a FFI or FFII collar pin you must COMPLETELY fill out the following section. Collar pins are only issued for AFSC FFI or FFII certification. Each is \$10, see AFSC Certification Fee Schedule for discounts.</i>	<i>INITIAL HERE</i>
Pin Shipping Address:	
City:	State:
Zip Code:	

-- OFFICIAL USE ONLY BY THE ALASKA FIRE STANDARDS COUNCIL --

Pre-Requisite(s) Met:					
Date Received:	Exam Type:	Skills Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No	Exam Score:	Fee, Date, & Invoice #:	Fee Rec'd Date:
	Exam Type:	Skills Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No	Exam Score:		
Retest Received:	Exam Type:	Skills Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No	Exam Score:	Fee, Date, & Invoice #:	Fee Rec'd Date:
Retest Received:	Exam Type:	Skills Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No	Exam Score:	Fee, Date, & Invoice #:	Fee Rec'd Date:
<i>Two retests per level before advisement candidate may require retraining, local authority determination.</i>					
Retest Received:	Exam Type:	Skills Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No	Exam Score:	Fee, Date, & Invoice #:	Fee Rec'd Date:
Retest Received:	Exam Type:	Skills Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No	Exam Score:	Fee, Date, & Invoice #:	Fee Rec'd Date:
FSC Approval Date:			Notes:		

