

# State Firefighters' and Fire Marshals' Association of Texas

Texas Volunteer Firefighters' and Fire Marshals' Certification Board  
 PO Box 1709 ♦ Manchaca, Texas 78652-1709 ♦ Phone: 512.454.3473  
 For faster processing: e-mail to [certification@sffma.org](mailto:certification@sffma.org) or fax to 512.453.1876

SFFMA OFFICE USE ONLY	
<input type="checkbox"/> DD	<input type="checkbox"/> ID
PAYMENT	
RECEIVED	
CERTIFIED	

Department Information
1) Fire Department:
2) Department's General E-mail:

Applicant Information **Fields 3, 5, and 6 are REQUIRED**	
3) Full Legal Name (including middle name, no initials):	
4) Name to Appear on Certificate (if different):	
5) Last 4 digits of SSN:	6) Birth Date:
7) Applicant's Direct E-mail:	

## CERTIFICATION COORDINATOR APPLICATION — \$25.00

THIS SECTION IS TO BE COMPLETED BY THE APPLICANT	
11) Total Number of Years Applicant Has Served in the Fire Service: _____	
<b>Both SFFMA Certification and Instructional Coursework must be completed in order to qualify for full certification:</b>	
12) SFFMA Certification:	<input type="checkbox"/> Full Firefighter I (select highest earned) (includes examinations) <input type="checkbox"/> Full Firefighter II (includes examinations) <input type="checkbox"/> Master Firefighter
13) Courses Completed:	<input type="checkbox"/> Methods of Teaching (select at least one) <input type="checkbox"/> NFPA 1041: Instructor I or higher <input type="checkbox"/> Instructional Techniques <input type="checkbox"/> Other

**Notice: "Provisional" status automatically assigned if instructional coursework documentation not submitted with application.**

### Duties of the Certification Coordinator:

- 1) Track and report training for the department
- 2) Maintain workshop attendance on a timely basis
- 3) Serve as a contact for the certification office

I have read and understand the duties as listed.

\_\_\_\_\_  
Applicant Signature

I attest that the information contained in this application is true and correct to the best of my knowledge.

\_\_\_\_\_  
Fire Chief Signature

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Print Name Here

\_\_\_\_\_  
Print Name Here