



MARYLAND VOLUNTARY FIRE SERVICE
CERTIFICATION SYSTEM

Maryland Fire Service Personnel Qualifications Board, Inc.
c/o Maryland Fire and Rescue Institute
University of Maryland Building 199
College Park, Maryland 20742-6811
1-800-ASK-MFRI



PREVIOUS EDITION CERTIFICATION APPLICATION

Applicant Information

Name: Last First Middle

Address: Street Route/PO Box

City County State Zip

Social Security: # - - Date of Birth: / / Phone: # - Area Code

Affiliation: Fire Department Company

Secondary Affiliation: Fire Department Company

Please complete all of the attached (pages) and ascertain what documentation must be submitted with this application. All documentation used to support certification requirements must be original if not on record with the MFSPQB certifying agency.

I hereby apply for Certification in the following area:

Health & Safety Officer
(1521-HSO; 2002, 2008 & 2015 ed.)

THE FEE MUST BE PAID WITH A CHECK OR MONEY ORDER MADE PAYABLE TO MFSPQB

IN-STATE APPLICANT (either affiliated with a Maryland emergency services organization, Maryland resident, or affiliated with an out-of-state emergency services that responds into Maryland routinely): MFSPQB and NBFSPQ - \$20.00
OUT-OF-STATE APPLICANT: NOT AVAILABLE.

Return check policy: Applicant will be charged \$10.00 for each returned check. Additionally, if the application has been processed, certificates produced and then revoked because of the bad check, the applicant will have to satisfy the first application fees plus returned check fees and then reapply at full cost(s).

I, the undersigned, certify by my signature that I fully understand that my significant misstatement in or omission from this application or any future application constitutes cause for denial of certification. All information submitted by me in this application is true to the best of my knowledge and belief.

Signature: Date:

Return completed application with check to the agency ATRA that sponsored the training completed or the above address.

Do Not Write Below This Line
For ATRA and MFSPQB Official Use Only

- ATRA Name: 1
Approval Date: 2 PRO BOARD Number:
Rejected Date: 3
Certification Level #: 4 MFSPQB Rep. Signature:
TEST DATE: 5
Signature: 6

CHECK APPLICABLE PROGRAMS THAT APPLY TO CERTIFICATION

HEALTH & SAFETY OFFICER

(NFPA 1521-HSO)

Prerequisites: NONE

ONE of the following options:

- () 2015 Edition, NFPA 1521, Chapters 4.
Successful completion of COURSE:
 - a. MFRI Fire Department Health & Safety Officer course, MGMT-216
(Successful completion of course November 1, 2016 thru December 31, 2022).

- () 2008 Edition, NFPA 1521, Chapters 4 & 5.
Successful completion of COURSE:
 - b. MFRI Fire Department Safety Officer course, FIRE-110
(Successful completion of course July 1, 2009 thru October 31, 2016).

- () 2002 Edition, NFPA 1521, Chapter 5.
Successful completion of COURSE:
 - c. MFRI Fire Department Safety Officer course
(Successful completion of course October 1, 2004 thru June 30, 2009).

ATTACH ALL REQUIRED SOURCE DOCUMENTATION TO EACH APPLICATION

CERTIFICATION STANDARDS, AVAILABILITY & ELIGIBILITY SUBJECT TO CHANGE W/O NOTICE

FORWARD APPLICATION TO THE SPONSORING AGENCY ATRA