

**FARGO FIRE DEPARTMENT
CERTIFICATION SYSTEM**



**FARGO
FIREFIGHTER II
STANDARD**

**NFPA 1001
2008 Edition**

FARGO FIRE DEPARTMENT

Fargo Fire Certification Committee

The Fargo Fire Certification Committee representatives:

Management	Asst. Chief Steve Balstad, Asst. Chief Rob Wilson
Union Local 642	Firefighter Ron Guggisberg
Fargo Firefighter	Firefighter J Todd LaValle
Haz Mat	Capt. Mark Waller
Technical Rescue:	Capt. LeRoy Skarloken
Volunteer Rep	West Fargo Fire Chief Roy Schatschneider
North Dakota Firefighters Assoc	Rick Jorgenson

Fargo Firefighter Certification Standards Certification Committee

The Fargo Fire Department would like to extend our gratitude to all the fire service professionals who worked on the firefighter certification standards. These individuals devoted many hours reviewing the National Fire Protection Association Standards, certification test banks and developing skills for these standards. To everyone involved you can take great satisfaction in knowing you have contributed to the professional development and safety of the fire service to the citizens of both Fargo and the State of North Dakota.

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INTRODUCTION

As the world changes, operations at fire departments also continue to become more technical and complex. The Fargo Fire Department recognizes that along with these changes comes the challenge to continue effective, efficient service for its citizens. To meet these challenges, the Fargo Fire Department is implementing a standardized approach through training and certification to national standards. Through this training and national certification, the Fargo Fire Department believes it will best serve the citizens of Fargo and the citizens of North Dakota in providing for their safety and fire protection needs. The Department also feels that the standardized approach to training and national certification will ensure that any agency requesting assistance from the Fargo Fire Department will receive well trained, competent responders to assist in providing an immediate, positive impact for the requesting agency.

The following certification requirements are based on the objectives listed in the National Fire Protection Association (NFPA) 1001, *Standard for Fire Fighter Professional Qualifications*, as verified and adopted by the Certification Committee.

CERTIFICATION REQUIREMENTS

Entrance Requirements

In order to certify within the Firefighter II certification program, a firefighter must fulfill the following requirements:

1. Complete fire department (AHJ) entrance requirements.
2. Maintain department records.
3. Train on the required written and practical objectives.
4. Meet any other training requirements/prerequisites (FFI) as defined by the Fargo Fire Department Certification Committee.
5. Pass both written and practical skills examinations administered by the Fargo Fire Department Certified Testers.

The Fargo Fire Department acknowledges the importance of and need for entrance requirements as listed in the NFPA 1001, *Standard on Fire Fighter Professional Qualifications*.

Physical Fitness Requirements

The requirements listed in NFPA 1001, Chapter 4 are:

1. Meet the minimum educational requirements established by the Fargo Fire Department or AHJ.
2. Meet the medical requirements of NFPA 1582, *Comprehensive Occupational Medical Program for Fire Departments*.
3. Physical fitness requirements for entry-level personnel shall be developed and validated by the Fargo Fire Department or AHJ. Physical fitness requirements shall be in compliance with applicable Equal Employment Opportunity regulations and other legal requirements.

DEPARTMENT TRAINING

The position of a Firefighter II is one which requires a high level of skill and knowledge. The training given to and received by firefighter participants should be of the highest quality and degree. All training received must meet the requirements of NFPA 1001, Chapter 6 and the skills as approved by the Fargo Fire Department Certification Committee contained within the Fargo Standard. All training received must be documented and recorded on an In-House Training Record (Appendix A). All testing for Firefighter II will be conducted following the policies and procedures of the Fargo Fire Department Certification Committee.

Training for Firefighter II is conducted at the department level or could be received through a joint training agreement between departments on a regional level. Regardless of where the training is received, it must prepare the candidate to be a competent and effective firefighter.

Firefighters at all levels of progression shall remain current with fire protection technology, fire suppression practices, and applicable standards by attending workshops and seminars, undergoing certifications testing and accessing professional publications. Continuing education or training is necessary to ensure that firefighters remain current and update their knowledge and skills in the evolving field of firefighting. Nationally recognized certification is one means of demonstrating proficiency in current practices. (NFPA 1001, 2008 Edition, 1.3.8)

The course material should be referenced to the following textbook to prepare the candidate to successfully pass the Fargo Fire Department Firefighter II certification examination.

Written Objectives

The written objectives for Firefighter II are covered in the following text:

1. Jones and Bartlett, *Fundamentals of Fire Fighter Skills, 2nd Edition*.
These textbooks are available in all Fargo fire stations.
2. Fargo Fire Department SOG's.

Manipulative Objectives

Each participant **must** be trained and evaluated in the performance of **all** manipulative skill objectives. Each of the manipulative skill objectives shall be completed swiftly, safely and with competence as defined below:

- **Swiftly** – Each manipulative skill objective must be completed within a reasonable timeframe.
- **Safely** – Each manipulative skill objective must be completed safely. Actions that could injure an individual or damage equipment are unacceptable. Equipment should be checked prior to skill testing or training to see that it is safe and functional.
- **Competence** – Each manipulative skill objective is performed in accordance with the Fargo Fire Department Standard. This includes performing the proper steps in sequence. Competence will be measured in accordance with the Fargo Fire Department Certification Committee manipulative skill objectives.

Department Training Officers

Department training officers shall be department certified at the **level** they are teaching.

Department training officers will be responsible for certification training. Their primary responsibility will be to teach and evaluate department personnel on manipulative skill and evolution requirements for each level of certification training. Cognitive skills are a combination of classroom and self study by the student.

Department Training Records

Each participant shall have a training record on file with the department, which indicates whether he/she has trained on all manipulative skill objectives. This record shall be signed off or initialed by a department training officer. Training records must indicate the date, instructor, and total number of hours trained for each manipulative skill objective. The training record check-off for the skill sheets is provided in Appendix A.

CERTIFICATION EXAMINATIONS

Written Examinations

The written examination is a randomly generated **100-question** test covering the written objectives of the Firefighter II standard. A minimum score of 70% is required to pass the certification examination. Firefighters failing the first attempt of the written exam will be permitted to retest the next time the test is administered.

SAMPLE WRITTEN EXAMINATION QUESTIONS:

The safest recommended means for a firefighter to disconnect electrical service to a building is by:

- a. cutting the service entrance wire
- b. pulling the meter
- c. locating the nearest transformer and deactivating it
- d. shutting off the main power breaker/fuse in the panel box**

Valves for water systems are broadly divided into two types. They are:

- a. gate and indicating
- b. ball and check
- c. indicating and non-indicating**
- d. screw and yoke

Manipulative Skills Examination

This is a two-step examination. The first step is a department records check and the second step is a manipulative skills examination. Certification testers certified to Tester II or Tester III by the Fargo Fire Department conduct the examination.

Training records are checked. If records are inadequate, corrective action must be taken before proceeding to the next step. The records must meet minimum requirements and are checked for the following:

1. Candidate has completed all training requirements for FFII and been successfully evaluated and met the minimum job performance requirements (JPR) for live fire training as prescribed in NFPA 1001.
2. A department training officer has signed off each manipulative skill and fire ground evolution.
3. The total number of hours trained on each manipulative skill and fire ground evolution is listed.

The manipulative skills examination is graded on a 100% pass/fail basis. The test is graded in the following three areas:

- **Swiftly** – Each manipulative skill objective must be completed within a reasonable timeframe.
- **Safely** – Each manipulative skill objective must be completed safely. Actions that could injure an individual or damage equipment are unacceptable. Equipment should be checked prior to skill testing or training to see that it is safe and functional.
- **Competence** – Each manipulative skill objective is performed in accordance with the Fargo Standard. This includes performing the proper steps in sequence. Competence will be measured in accordance with the Fargo Fire Department manipulative skill objectives.

Candidates are tested on **three (3) manipulative skills with at least one (1) being an evolution**. No prior notification of the skills being tested will be given. **No training, teaching, or coaching is allowed during the test.**

Fire ground evolution: Candidates will test one evolution. This is a 100% pass/fail test. Candidates are allowed to fail only two (2) skill areas during the evolution and still pass the evolution. If they fail more than two areas, they have failed the evolution and must retest the entire evolution. The candidate that missed a skill during the evolution will be tested individually on the missed skill(s). This would be considered the second attempt for that skill. If a candidate fails a second attempt, they have failed the evolution.

Individual skills: Candidates will be given two individual skills to complete and are given two attempts if necessary to perform each skill. If they fail on the second attempt, they have failed the individual skills portion of the examination.

Candidates who fail the evolution or individual skills part of the manipulative examination will be required to complete further training on those areas that they were not successful in the testing. Candidates taking a third attempt will be required to test on the evolution or skill they failed. If probationary Fargo Firefighter candidates fail the third and fourth attempt, they will be dismissed from service. Incumbents who fail a third and fourth attempt will have up to the three year window to retake the test. If not successful in that time, they will have to start the process from the beginning.

Prerequisites for Firefighter II Certification

Prior to certification at the Firefighter II level, firefighters must be Pro Board certified Firefighter I level, Hazardous Materials First Responder-**Awareness** level and Hazardous Materials First Responder-**Operations** level.

FIREFIGHTER II CERTIFICATION CHECKLIST

ENTRANCE REQUIREMENTS:

- Each candidate has met requirements listed in NFPA 1001, Chapter 4 or those established by the authority having jurisdiction.
- Each candidate shall provide an application for testing /affidavit signed by the candidate and the Chief/ Head of the Department verifying that all pre-requisites including all **live fire requirements** of NFPA 1001 have been completed.

DEPARTMENT TRAINING RECORDS:

- Each participant has a training record on file with the department that shows:
 1. A learning experience in each manipulative skill objective.
 2. Dates of training.
 3. Initials of instructors.
 4. Total number of hours trained in each manipulative skill objective.

ADDITIONAL TRAINING/PREREQUISITE REQUIREMENTS:

- Each participant is certified at the Firefighter I and Hazardous Materials Awareness and Operations level.
- Complete IS-100: Introduction to ICS.
- Complete IS-200 Basic ICS.
- Complete IS-700: NIMS, An Introduction. To ICS.

CERTIFICATION EXAMINATIONS:

- Each participant has passed the Fargo Fire Department Pro Board written examination.
- Each participant has passed the Fargo Fire Department manipulative skills testing administered by an approved Certification Tester.

Firefighter II- Certification:

-Certification Coordinator has reviewed records for completeness.

FIREFIGHTER II MANIPULATIVE SKILL OBJECTIVES

GENERAL

NFPA 1001, 6.2.2

Skill 1: Demonstrate procedures for assuming and transferring command at an emergency scene, utilizing the Incident Command System.

CONDITION: Incident scenario.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Report arrival at emergency scene.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Give a brief size up:	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Confirm address upon arrival.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Building and occupancy description.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. Nature and extent of situation, identify special conditions or hazards.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
6. Operational mode selected (Offensive, Defensive, Transitional or Investigation).	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
7. Assignments to other responding units.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
8. Establish and name command.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
9. Request additional resources if needed.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
10. Transfer command (utilizing department guidelines).	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

FIRE DEPARTMENT COMMUNICATIONS

NFPA 1001, 6.2.1

Skill 2:

Fargo Fire Incident Reporting

Complete a basic fire report by completing a NFIRS report. You have been supplied with a National Fire Incident Reporting System on a computer and an incident scenario.

CONDITION:

You have access to a computer and have a fire scenario provided in Appendix B.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Complete all required fields.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Check spelling.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Other pertinent information is recorded in narrative. (Note: Narrative must be completed).	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

FIRE GROUND OPERATIONS

NFPA 1001, 6.3.1

Skill 3: Demonstrate the correct procedures for extinguishment of an exterior combustible liquids fire with a foam fire stream.

CONDITION: Given a scenario, wearing full protective clothing, SCBA, 1 3/4” hose, foam on truck, fog nozzle, shaper and a **2-member firefighter team** (3-member engine company: Officer and Engineer are fulfilling their roles.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Pull correct pre-connect (fog nozzle) with or without shaper.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Select correct gallonage for foam.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Approach spill as part of coordinated team.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Demonstrate proper application techniques.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. Retreat from spill maintaining team integrity.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

NFPA 1001, 6.3.2

Skill 4: **Coordinate an interior attack line for team's accomplishment of an assignment in a structure fire.**

CONDITION: Given a fire ground scenario, as a Captain and a 3-firefighter team, (for example: attic fire, grade level, upper level, or basement level fire), wearing full P.P.E. & SCBA, 200 feet of charged 1 3/4" or larger attack line, and forcible entry tools.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Determine and communicate location of fire, (attic, level, upper level, or basement level fire).	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Communicate attack method to crew and arriving crews.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Select and position proper hose line and nozzle.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Communicate and assign rescue and ventilation needs.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. Communicate interior fire conditions to IC.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
6. Advance to seat of fire and extinguish.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
7. Team integrity is maintained (sight, voice, or physical contact).	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

NFPA 1001, 6.3.3

Skill 5: Demonstrate the correct procedures for control of a fire involving a flammable gas cylinder:

A. Use of an unmanned Master stream (500 gpm or greater).

CONDITION: Given a scenario, wearing full protective clothing, water supply, master stream appliance, 100 feet 2 ½” hose and a 2-firefighter team.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Escape routes or safe havens are identified.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Set up appliance.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Connect hose lines from apparatus to appliance.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Signal for water.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. Exercise safety as hose lines charge.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
6. Adjust stream of appliance to cool tank vapor space.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

B. Fire Attack

CONDITION: Given a scenario, cylinder outside of a structure, a 7-firefighter team, wearing P.P.E. and SCBA, 2-1 3/4" and combination nozzles.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Escape routes or safe havens are identified.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Contents are identified.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Cool the vapor space of the <u>cylinder</u> .	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Coordinated advance from side of cylinder.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. Adjust nozzle patterns during advance for crew protection.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
6. Try not to extinguish flame.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
7. Close valve.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
8. Coordinated retreat from cylinder.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
9. Adjust nozzle during retreat for cooling cylinder vapor space.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____Tester Name 2nd Attempt _____

Date: _____

NFPA 1001, 6.3.4**Skill 6:**

Protect evidence of fire cause and origin so that the evidence is properly protected from further disturbance.

CONDITION:

Given a scenario, wearing full protective clothing, flashlight, overhaul tools, hose line or water extinguisher.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Identify the fire origin area.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Identify possible causes for fire ignition.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Identify types of evidence.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Preserve any evidence found by leaving where found.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. Establish barriers to protect the scene and evidence as found.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
6. Notify command or fire investigator of findings.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

RESCUE OPERATIONS

SAFETY NOTE: While conducting rescue operations around vehicles, safety should be exercised with regards to automobile SRS systems, fuel lines, AC lines, electrical lines, and other vehicle design hazards

NFPA 1001, 6.4.1, 6.4.2

Skill 7: Demonstrate the following evolutions, which may be required to extricate an entrapped victim of a motor vehicle accident by displacing or removing:

A. Vehicle windshield.

CONDITION: Given a scenario, wearing full P.P.E., including eye protection (per NFPA 1500 Helmet face visor is not considered appropriate eye protection), vehicle, cribbing, extrication equipment used by the department, and a 2-firefighter team.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Crib vehicle for safety.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Disconnect the vehicle battery(s) as applicable.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Enforce department policy on airbags. Indicate presence of airbags and appropriate control measures.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Maintain victim safety during windshield removal.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. Remove windshield completely.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

B. Vehicle roof.

CONDITION: Given a scenario, wearing full P.P.E., including eye protection (per NFPA 1500 Helmet face visor is not considered appropriate eye protection), vehicle, cribbing, extrication equipment used by the department, and a 3-firefighter team.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Crib vehicle for safety.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Disconnect battery and check for side restraint safety system.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Maintain victim safety during roof removal.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Cut front vehicle roof posts and fold roof back or remove roof entirely.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

C. Vehicle door.

CONDITION: Given a scenario, wearing full P.P.E., including eye protection (per NFPA 1500 Helmet face visor is not considered appropriate eye protection), vehicle, cribbing, extrication equipment used by the department, and a 2-firefighter team.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Crib vehicle for safety.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Disconnect battery(s) as applicable. Consider airbags.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Maintain victim safety during door removal.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Remove door.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

D. Displace dashboard.

CONDITION: Given a scenario, wearing full P.P.E., including eye protection (per NFPA 1500 Helmet face visor is not considered appropriate eye protection), vehicle, cribbing, extrication equipment used by the department, and a 2-firefighter team.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Crib vehicle for safety, disconnect battery.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Maintain victim safety during dashboard displacement. Consider airbags.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Make appropriate cuts. Displace the dashboard.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

PREVENTION, PREPAREDNESS & MAINTENANCE

NFPA 1001, 6.5.1

Skill 8: Demonstrate inspection procedures for a private dwelling.

CONDITION: Wearing department uniform, clipboard, flashlight, checklist, and fire prevention materials.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Greet occupant at door and introduce yourself	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Explain the purpose of the visit and inspection procedure.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Inspect basement, attic, utility room, storage room, kitchen, and garage.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Identify special hazards: heating appliances, smoking Materials, electrical outlets, storage of flammable liquids and combustible materials.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. Placement of smoke detectors.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
6. Discuss with occupant what was found and suggestions for correction.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
7. Thank occupant and leave a copy of the report.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
8. Save copy in appropriate folder.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

NFPA 1001, 6.5.2**Skill 9:**

Present a prepared program to an audience on one of the following topics:

1. Stop, drop, and roll;
2. Crawl low in smoke;
3. Escape planning;
4. Alerting others;
5. Calling the fire department;
6. Fire station tour;
7. Residential smoke detector placement and maintenance; and
8. Other public fire education programs.

CONDITION: Wearing department uniform, audience and fire prevention materials.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Greet class and introduce yourself.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Introduce the topic.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Present topic.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Review major points.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. Answer questions.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
6. Hand out reading materials as necessary.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
7. Document the following:		
Name of program	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Name of presenter	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Date of program	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Location	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Number in attendance	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Subject presented	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Evaluation and comments	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

NFPA 1001, 6.5.3**Skill 10: Prepare a pre-incident survey.****CONDITION:** Given a Fargo Fire Department inspection data sheet, clipboard, form, mapping symbols, graph paper and pencils.**APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:**

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Draw a floor plan.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Identify utility controls.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Identify means of egress.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Identify occupant information.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. Identify occupancy and special hazards.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
6. Identify suppression systems and controls.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
7. Use standard mapping symbols and abbreviations.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____Tester Name 2nd Attempt _____

Date: _____

NFPA 1001, 6.5.4

Skill 11: Demonstrate the service and maintenance of power plants and lighting equipment.

CONDITION: Wearing fire helmet, eye protection, water resistant safety shoes/boots, work gloves, given a gasoline-powered generator, electrical power cords, and portable lighting.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>	<u>2nd Att.</u>
	Y N	Y N
1. Check oil and gasoline for “full” level.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Check air cleaner element for debris.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Check spark plug and spark plug wire for deterioration and proper connection.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Check unit for loose bolts or screws.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. Check electrical cords to ensure insulation is not damaged.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
6. <u>Check portable lights for damage.</u>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
7. <u>Start unit and test operation of lighting equipment.</u>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____

Tester Name 2nd Attempt _____

Date: _____

NFPA 1001, 6.5.5**Skill 12:****Demonstrate annual service test for fire hose.****CONDITION:**

Wearing water resistant safety shoes/boots, work gloves, a 3-firefighter team, 4 lengths of 1 3/4" hose, hose testing machine, 4 nozzles, safety clamp, marking pen, timer and hose records.

SAFETY:

PRESSURIZED HOSE IS POTENTIALLY DANGEROUS. DO NOT STAND OR WALK NEAR PRESSURIZED HOSE DURING TEST.

APPLICANT PERFORMED THE FOLLOWING COMPETENCIES:

	<u>1st Att.</u>		<u>2nd Att.</u>	
	Y	N	Y	N
1. Connect hose sections to hose testing machine (check gaskets before connecting).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Tighten connections with spanner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Attach nozzles to open end of hose lines.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Secure hose with safety clamp at nozzle end.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Open valve and fill hoses with water.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Open and raise nozzles to discharge all air from hose line.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Close nozzles.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Check hose for kinks and twists or leaking connections.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Mark hose jackets against each coupling.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Close test gate valve.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Slowly increase pump pressure to the required service test pressure Maintain test pressure for 5 minutes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Slowly reduce pump pressure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Close discharge valves and open nozzle to drain pressure from hose line.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Check marks placed on the hose at the couplings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Record the test results for each section of hose.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PERFORMANCE RATING ON THIS SKILL:

	<u>PASS</u>	<u>FAIL</u>
First Attempt	<input type="checkbox"/>	<input type="checkbox"/>
Second Attempt	<input type="checkbox"/>	<input type="checkbox"/>

Candidate Name _____

Tester Name 1st Attempt _____Tester Name 2nd Attempt _____

Date: _____

APPENDIX A
TRAINING RECORDS

FIREFIGHTER II – TRAINING RECORD

NAME: _____ SSN: - - DEPARTMENT: _____

SECTION	TRAINING RECORD			IN-HOUSE COMP. EXAM			MANIPULATIVE SKILL - DEMONSTRATE
	DATE	INST	HRS	DATE	INST	P/F	
General							1. Demonstrate procedures for assuming and transferring command at an emergency scene using the ICS system.
Communications							2. Complete an “Incident Report”.
Fire Ground Operations							3. Demonstrate procedures ext. combustible liquids fire.
							4. Coordinate an interior attack during a structure fire.
							5A. Control fire involving gas cylinder-with master stream.
							5B. Control fire involving gas cylinder-Fire Attack.
Rescue Operations							6. Protect evidence of fire cause and origin.
							7A. Demonstrate evolution of displacing a “Vehicle Windshield”.
							7B. Demonstrate the evolution of displacing a “Vehicle Roof”.
							7C. Demonstrate the evolution of displacing a “Vehicle Door”.
Prevention, Preparedness, Maintenance							7D. Demonstrate evolution of displacing a “Vehicle Dashboard”.
							8. Demonstrate inspection procedures for a private dwelling.
							9. Present a prepared program to an audience on one of the following topics:
							10. Prepare a pre-incident survey.
						11. Demonstrate the service and maintenance of power plants and lighting equipment.	
						12. Demonstrate annual service test for fire hose.	

**APPENDIX B
FARGO FIRE INCIDENT
REPORTING SYSTEM**

Name: _____

A FDID Star State Star Incident Date Star MM DD YYYY Station Incident Number Star Exposure Star Delete Change No Activity **NFIRS - 1 Basic**

B Location Check this box to indicate that the address for this incident is provided on the Wildland Fire Module in Section B "Alternative Location Specification". Use only for Wildland fires. Census Tract _____ - _____

Street address Intersection In front of Rear of Adjacent to Directions

Number/Milepost Prefix Street or Highway Street Type Suffix

Apt./Suite/Room City State Zip Code

Cross street or directions, as applicable

C Incident Type Star Incident Type _____

D Aid Given or Received Star

1 Mutual aid received
 2 Automatic aid recv.
 3 Mutual aid given
 4 Automatic aid given
 5 Other aid given
 N None

Their FDID _____ Their State _____
 Their Incident Number _____

E1 Dates & Times Midnight is 0000

Month Day Year Hour Min

ALARM always required

Alarm Star

ARRIVAL required, unless canceled or did not arrive

Arrival Star

CONTROLLED optional, except for wildland fires

Controlled Star

LAST UNIT CLEARED, required except for wildland fires

Last Unit Cleared Star

E2 Shifts & Alarms Local Option

Shift or platoon Alarms District

E3 Special Studies Local Option

Special Study ID# Special Study Value

F Actions Taken Star

Primary Action Taken (1) _____

Additional Action Taken (2) _____

Additional Action Taken (3) _____

G1 Resources Star

Check this box and skip this section if an Apparatus or Personnel form is used.

Apparatus Personnel

Suppression _____

EMS _____

Other _____

Check box if resource counts include aid received resources.

G2 Estimated Dollar Losses & Values

LOSSES: Required for all fires if known. Optional for non fires. None

Property \$ _____, _____, _____

Contents \$ _____, _____, _____

PRE-INCIDENT VALUE: Optional

Property \$ _____, _____, _____

Contents \$ _____, _____, _____

Completed Modules

Fire-2
 Structure-3
 Civilian Fire Cas.-4
 Fire Serv. Casualty-5
 EMS-6
 HazMat-7
 Wildland Fire-8
 Apparatus-9
 Personnel-10
 Arson-11

H1 Casualties None

Deaths Injuries

Fire Service _____

Civilian _____

H2 Detector Required for confined fires.

1 Detector alerted occupants
 2 Detector did not alert them
 U Unknown

H3 Hazardous Materials Release

N None

1 Natural gas: slow leak, no evacuation or HazMat actions
 2 Propane gas: <21 lb. tank (as in home BBQ grill)
 3 Gasoline: vehicle fuel tank or portable container
 4 Kerosene: fuel burning equipment or portable storage
 5 Diesel fuel/fuel oil: vehicle fuel tank or portable storage
 6 Household solvents: home/office spill, cleanup only
 7 Motor oil: from engine or portable container
 8 Paint: from paint cans totaling <55 gallons
 0 Other: Special HazMat actions required or spill > 55 gal., Please complete the HazMat form

Mixed Use Property

NN Not mixed
 10 Assembly Use
 20 Education use
 33 Medical use
 40 Residential use
 51 Row of stores
 53 Enclosed mall
 58 Business & residential
 59 Office use
 60 Industrial use
 63 Military use
 65 Farm use
 00 Other mixed use

J Property Use Star **Structures**

341 Clinic, clinic type infirmary
 342 Doctor/dentist office
 361 Prison or jail, not juvenile
 419 1- or 2- family dwelling
 429 Multi-family dwelling
 439 Rooming/boardng house
 449 Commercial hotel or motel
 459 Residential, board and care
 464 Dormitory/barracks
 519 Food and beverage sales

539 Household goods, sales, repairs
 579 Motor vehicle/boat sales/repairs
 571 Gas or service station
 599 Business office
 615 Electric generating plant
 629 Laboratory/science lab
 700 Manufacturing plant
 819 Livestock/poultry storage (barn)
 882 Non-residential parking garage
 891 Warehouse

Outside

124 Playground or park
 655 Crops or orchard
 669 Forest (timberland)
 807 Outdoor storage area
 919 Dump or sanitary landfill
 931 Open land or field

936 Vacant lot
 938 Graded/cared for plot of land
 946 Lake, river, stream
 951 Railroad right of way
 960 Other street
 961 Highway/divided highway
 962 Residential street/driveway

981 Construction site
 984 Industrial plant yard

Look up and enter a Property Use code only if you have NOT checked a Property Use box: Property Use _____

NFIRS-1 Revision 03/11/99

K1 Person/Entity Involved

Local Option Business name (if applicable) _____ Area Code _____ Phone Number _____

Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr., Ms., Mrs. First Name _____ MI _____ Last Name _____ Suffix _____

Number _____ Prefix _____ Street or Highway _____ Street Type _____ Suffix _____

Post Office Box _____ Apt./Suite/Room _____ City _____

State _____ Zip Code _____

More people involved? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary.

K2 Owner

Local Option Same as person involved? Then check this box and skip the rest of this section.

Business name (if applicable) _____ Area Code _____ Phone Number _____

Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr., Ms., Mrs. First Name _____ MI _____ Last Name _____ Suffix _____

Number _____ Prefix _____ Street or Highway _____ Street Type _____ Suffix _____

Post Office Box _____ Apt./Suite/Room _____ City _____

State _____ Zip Code _____

L Remarks:

Local Option 

Fire Module Required?

Check the box that applies and then complete the additional Fire mod. based on Incident Type as follows:

<input type="checkbox"/> Buildings 111	Complete Fire & Structure
<input type="checkbox"/> Special structure 112	Complete Fire Mod. & the 1 block on Structure Module
<input type="checkbox"/> Confined 113-118	Complete Basic Module
<input type="checkbox"/> Mobile property 120-123	Complete Fire Module
<input type="checkbox"/> Vehicle 130-138	Complete Fire Module
<input type="checkbox"/> Vegetation 140-143	Complete Fire or Wildland
<input type="checkbox"/> Outside rubbish fire 150-155	Complete Basic Module
<input type="checkbox"/> Special outside fire 160-164	Complete Fire Module
<input type="checkbox"/> Crop fire 170-173	Complete Fire Module

 ITEMS WITH A  MUST ALWAYS BE COMPLETED!

More remarks? Check this box and attach Supplemental Forms(NFIRS-1S) as necessary.

M Authorization

Check box if same as Officer in charge.

Officer in charge ID _____ Signature _____ Position or rank _____ Assignment _____ Month _____ Day _____ Year _____

Member making report ID _____ Signature _____ Position or rank _____ Assignment _____ Month _____ Day _____ Year _____

Incident Report Scenario

Scenario

Food on stove

On Saturday May 23, 2005 at 15:13 hours a call is received for a fire at 112 Main Av., Fargo, ND 58102. Engines 801, 802, 804, Rescue 834, Ladder 821 and 800 respond. They arrive at 15:18 hours to find smoke coming from the kitchen area as a result of unattended cooking. The incident is confined to the pot on the stove. Units 801, 802 and 821 were canceled enroute.

E804 removes the pot from the stove with R 834 establishing ventilation. The fire did not extend beyond the pot. Damage is confined to the pot, the food, with minimal smoke damage in the kitchen area. The homeowner, Ms. Sally Jones, reports she was notified of the fire by the smoke detector.

The value of the property is set at \$185,000 and contents at \$47,000. There is no loss as a result of the fire.

The incident was controlled at 15:30 and the units cleared at 16:20. There was no mutual aid received nor were there any injuries. The incident number assigned 08-000xxxx. There were no exposures.

The shift on duty was C with a one alarm assignment.

The Fargo FDID # is 09109. Every fire department has its own ID number for NFIRS.

APPENDIX C
TESTER INSTRUCTIONS

Tester Instructions for Manipulative Skills Testing

Standard and skill(s) being tested:

Date: _____ **Location:** _____

Testers, please review the following procedures and follow them as outlined when testing.

Prior to testing, review training records of new recruits to ensure they have completed all training requirements or ensure that all incumbents meet the qualifications for testing. Training Chief can verify qualifications for incumbent testing.

During testing, there will be two assigned testers. One will be the **lead tester** and the other the **safety officer**. If a candidate fails and needs to retest any portion, the testers will trade positions and retest the candidate with the lead tester now the safety officer and the safety officer now the tester.

As **safety officer**, you will not assist with the testing process. You are there to protect the participant from injury during the testing process. The safety officer should ensure that all participants testing wear appropriate PPE and all equipment is in safe working condition. The safety officer shall always be in a position to observe all participants and ensure their safety at all times during testing.

Candidates will wait in an area separate from the testing area. A proctor will monitor the candidates to ensure that they don't discuss the stations being tested.

Testing Procedures

Testers will score the participants in the following manner:

1. **Swiftly** completing the skill in a reasonable timeframe, exercising **safety** in completing the skill, and show **competence** by completing all performance criteria.
2. Candidates must pass all critical competencies to pass the individual skill. If they do not do this they fail the first attempt. Candidates are given two attempts on the first test date. The candidate will be referred to the Chief of Training for further training in that skill and will then test at a later date. The failed skill will be tested on the next test date.
3. Testers will not coach or instruct during the testing process.
4. Testers will ensure that all equipment is in safe working condition and ensure that all participants are wearing appropriate PPE during the test as required by the skills being tested.

While administering the test, the tester will read the skills to be demonstrated and the conditions to be met to complete the skill.

- A. The tester will ask for any questions. Questions will not be answered after the testing on a skill begins.
- B. Candidates may take time to discuss a plan of action with their team mate before the skill begins.

Firefighter 2

- C. Candidates should verbally state, to the tester, that they are ready to begin the skill.
- D. Candidates are encouraged to verbalize during the completion of the skill competencies.
- E. Candidates should verbally state to the tester that they have completed the skill.
- F. Inform the candidates that there should be no running during the test. This is considered a safety violation and will not be tolerated.
- G. Leaving the testing area will not be permitted. The only exception to this rule is if a Fargo Fire Crew is summoned to an emergency run. Testing will resume on their return if it is less than one hour or if testing is still being conducted.

Skill testing sheets will be completed by the lead tester including date, name of tester(s), candidate name, pass or fail and signed by both tester and candidate. **Sheets shall remain with the tester, put in a sealed envelope and returned to the Certification Coordinator.**

Post Test

1. Conduct a briefing with the participants.
2. Thank them and ask if there are any questions.
3. If there are any problems or concerns to write them down and forward to the certification committee.
4. Make sure all equipment is returned to service.