

Mississippi Fire Personnel Minimum Standards and Certification Board

Pursuant to the provisions of the Universal Recognition of Occupational Licenses Act, Mississippi shall recognize occupational licenses obtained from other states.

Application for Certification Checklist

Applicants for reciprocity should submit all requested information. The Mississippi Fire Personnel Minimum Standards and Certification Board may request documentation in addition to that listed below in order to make an informed decision. ***Failure to submit all documents requested and/or failure to submit fully completed and signed forms may result in denial of certification.*** Reciprocity will only be granted for the required minimum standards courses, which are NFPA 1001 Fire Fighter I – II and NFPA 472 Hazardous Materials Awareness and Operations. Forms and supporting documents must be submitted at least three weeks prior to the Board’s bi-monthly meeting to be included on the agenda. Information received less than three weeks prior to a meeting will be added to the agenda for the subsequent meeting. Documents requested for certification review are:

- A completed, current MSCB Personnel Action Form, signed by the training officer or executive officer of the Mississippi fire department where the applicant currently serves. The current version of the form can be found at: <http://www.mid.ms.gov/minstand/pdf/Personnelaction.pdf>
- A completed, current MSCB Application for Certification, signed by the training officer or executive officer of the Mississippi fire department where the applicant currently serves. The current version of the MSCB Application for Certification form can be found at: <http://www.mid.ms.gov/minstand/pdf/Applicationforcert.pdf>
- Copies of all relevant training certificates (e.g., NFPA 1001 Fire Fighter I - Fire Fighter II, NFPA 472 Hazardous Materials Awareness and Hazardous Materials Operations). Certification numbers on IFSAC, Pro Board, or other certification seals must be legible, or if the seals will not copy legibly, the certificate numbers must be written next to the seal on the certificate copy.
- Evidence of most recent physical abilities test, if available.
- A fire service resume, which includes names and locations of all departments served, and dates of employment or volunteer service at each department.

Information should be sent to the attention of Lynn Tyler at the Mississippi Fire Personnel Minimum Standards and Certification Board. Documents may be scanned and emailed to Lynn at lytler@msfa.ms.gov, or faxed to her at 601-932-2819. They may also be mailed to the address below.

**Mississippi Fire Personnel Minimum Standards and Certification Board
1 Fire Academy USA
Jackson, MS 39208
601-932-2444**

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Application for Certification

Please Print or Type

Employee First Name:		M.I.		Last Name:	
Social Security #:		Date of Employment:			
Date of Birth:		Date of This Application:			
Current Position:	<input type="checkbox"/> Career Fire Fighter <input type="checkbox"/> Volunteer Fire Fighter <input type="checkbox"/> Other (please specify)				
Fire Department Serving:					
Fire Chief:		Department Phone #:			
Dept. Address:					
City:		State:		Zip Code:	
Level of Certification Requested:					

Complete the Training Information Below:

Include all fire related training courses relative to the level of certification being sought. Submit documentation when applicable. Students having completed an approved training program must submit proof of successful completion; students having completed a training program not approved by the MSCB may be required to submit further documentation prior to approval. **Students are responsible for obtaining and submitting all requested documents. If a student's credentials are from the Department of Defense (DOD), the student must also supply the DOD student ID number.** The Board is not responsible for obtaining documents needed for reciprocity consideration.

School Name	Course Title	Course Length	Date Completed	<u>DOD Student ID #</u> <small>(if applicable)</small>

To the best of my knowledge and belief, the applicant meets all criteria for certification at the level being sought in this application.

(Signature of Fire Chief or Designee)

(Date)

Fire Department (Career and Volunteer) Work History

Include Dept. Name/Address/Phone #/Name of Contact/Dates of Employment (Use attachments if necessary.)

1. _____
2. _____

Have you ever been convicted of a Felony? () YES () NO

If the answer is YES, please attach a written statement explaining the circumstances and attach a copy of court and/or law enforcement documents regarding your charges/conviction/sentencing.

I certify that the material contained in this application is a true and accurate description of my fire service training and experience, qualifying me for the certification sought in this application.

(Signature of Applicant)

(Date)

WARNING: Mississippi Code as Annotated 97-7-10 Fraudulent statements and representations provide for severe penalties from misrepresentation or fraudulent statements to a board. This statute authorizes a fine of up to ten thousand dollars (\$10,000) and a jail sentence of up to five (5) years.