

Date Received	 <b>Department of Public Safety</b> <b>Division of Fire Safety</b> PO Box 844, Jefferson City, MO 65102 (573) 522-2426 FAX (573) 751-1744 Website: <a href="http://www.dfs.dps.mo.gov">www.dfs.dps.mo.gov</a>	 	Date Approved
Received By			Approved By
<b>Application for Hazardous Materials Operations Evaluator Confirmation</b>			

***To be completed by the Course Lead Instructor***

<b>Host Agency for Course</b>		<b>Practical Skill Test Date</b>	
<b>Street Address</b>	<b>City</b>	<b>Zip Code</b>	<b>Number of Students</b>
<b>Lead Instructor's Name</b>		<b>Mobile Phone Number</b>	
<b>Email address</b>		<b>Test Site Location</b>	
<b>Lead Evaluator Information:</b> Note: Refer to the "Hazardous Materials Guide for Lead Instructor" for number of evaluators required to conduct a skills exam. (A minimum of two evaluators is required)			
<b>Last Name</b>	<b>First Name</b>	<b>Phone #</b>	
<b>List Assisting Evaluator</b>	<b>List Assisting Evaluator</b>		
<b>List Assisting Evaluator</b>	<b>List Assisting Evaluator</b>		
<b>List Assisting Evaluator</b>	<b>List Assisting Evaluator</b>		
<b>Signature (Lead Instructor)</b>			<b>Date</b>

***This completed form must be received by the Division of Fire Safety no less than 72 hours prior to the start of the approved course.***

Division of Fire Safety Use Only		
	<b>Signature</b>	<b>Date</b>
<b>Approval Granted and Confirmation Sent</b>		
<b>Note:</b>		