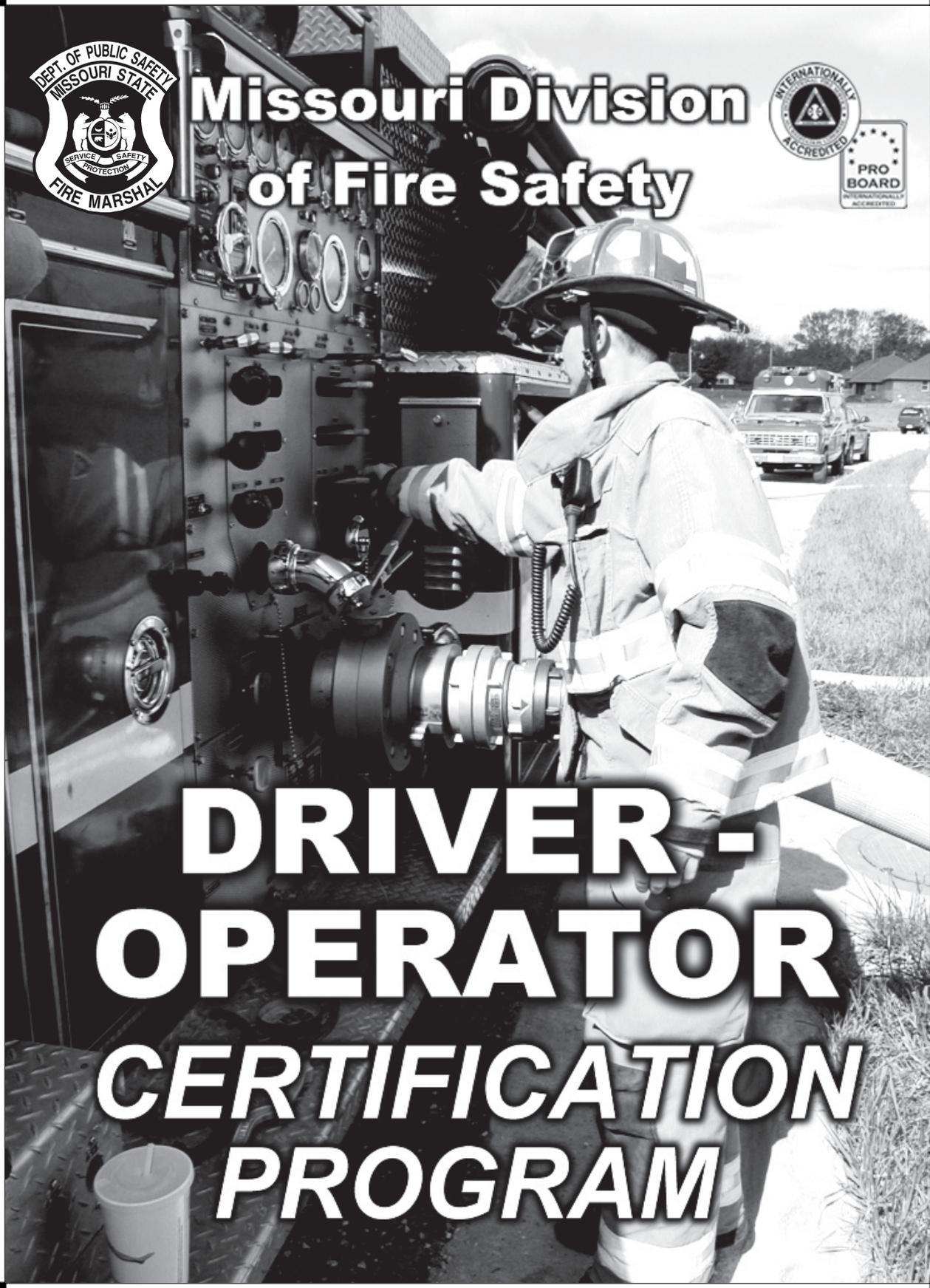




# Missouri Division of Fire Safety



# DRIVER- OPERATOR CERTIFICATION PROGRAM





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***DRIVER/OPERATOR CERTIFICATION PROGRAM***

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## MISSION

The Division of Fire Safety provides proactive statutory enforcement, regulatory oversight and education to protect all lives and property from the devastation of fires, explosions and life safety perils.



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***DRIVER/OPERATOR CERTIFICATION PROGRAM***

## **CERTIFICATION PROCESS**

The guidelines for the state certification program are designed to ensure the following: accountability, consistency, and credibility of instruction, testing, and certification of fire fighters in the state of Missouri.

### **Goals of the Certification Program:**

1. To raise the level of fire protection for the State of Missouri.
2. To improve training and education for the fire service of Missouri.
3. Establish minimum basic training standards for fire protection personnel.
4. Issuance of certificates to persons who complete requirements for certification and pass the required state examinations.
5. To maintain records of persons who have attained state certification.

Fire Apparatus Driver/Operator Certification is provided through the Missouri Department of Public Safety, Division of Fire Safety. The Missouri Division of Fire Safety shall certify fire fighters based on a combination of requirements and qualifications.

The Missouri Division of Fire Safety subscribes to the policy of nondiscrimination in areas of race, color, religion, sex, age, national origin, and the handicapped. Entry level qualifications are reviewed to ensure that each applicant meets the specified requirements.



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*DRIVER/OPERATOR CERTIFICATION PROGRAM*

## Fire Apparatus Driver/Operator Certification

Certification is granted to those individuals who meet the required qualifications and successfully pass the appropriate Fire Apparatus Driver/Operator certification examination. The requirements for Fire Apparatus Driver/Operator are based on the Standard for Fire Apparatus Driver/Operator Professional Qualifications, NFPA 1002-1998. All qualifications must be met and documentation supplied to the Division of Fire Safety prior to admission to the examination. **Applicants have one year from the time of course completion to complete the certification process.**

### I. General Requirements for Driver/Operator Certification

Certification as Fire Apparatus Driver/Operator will be issued to those individuals who have met the following guidelines and provided documentation verifying:

- A. Applicant must provide verification the applicant has three years of active service within the fire service or a letter of recommendation from the Fire Chief of his or her department.
- B. Applicant must be a resident of Missouri, or employed with a fire department within the State.
- C. Applicant must provide a copy of a valid Missouri driver's license.
- D. Applicant must provide verification of completion of Fire Fighter I certification.
- E. Applicant must have completed an approved Driver/Operator training program according to NFPA 1002-1998, and provided verification of successful completion of the course and all required practical skills.
- F. Applicant must attain a minimum score of 70% on the appropriate level of the Division of Fire Safety Driver/Operator certification examination.



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## *DRIVER/OPERATOR CERTIFICATION PROGRAM*

### **II. Driver/Operator Guidelines for Course Approval**

- A. The course must be approved by the Division of Fire Safety as meeting or exceeding the appropriate level of NFPA 1002.
- B. The Lead Course Instructor will verify that the candidate has successfully completed the course and all required practical skills.
- C. Training records for the course shall be maintained by the department and/or Lead Course Instructor.
- D. The Lead Course Instructor and/or department shall agree to inspection of course records during regular business hours if deemed necessary by the Division of Fire Safety.
- E. Courses will be approved only for departments that have completed the statutory requirement of annual registration with the Division of Fire Safety.

### **III. Approved Courses & Test Eligibility**

The candidate for state certification must have attended the Fire Apparatus Driver/Operator course administered by the University of Missouri Fire and Rescue Training Institute in order to be eligible to take the Division of Fire Safety Certification Exam.

Other courses must be submitted and reviewed for approval by the Division of Fire Safety prior to acceptance for the certification exam.



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***DRIVER/OPERATOR CERTIFICATION PROGRAM***

#### **IV. Procedure for Course Approval**

- A. If you are wanting to conduct a Fire Apparatus Driver/Operator Course within your department or agency, and you are using the approved curriculum listed above, you must submit an "Approval Request for Course Delivery" form (enclosed) detailing when and where the course is to be delivered, course completion date, Lead Course Instructor, and the department/agency responsible for record keeping. The Division of Fire Safety's Fire Apparatus Driver/Operator practical skills must be used for ALL courses.

NOTE: Courses will not be approved for departments that have not complied with the Missouri Statutory requirement of yearly registration with the Division of Fire Safety.

#### **V. Requirements of Lead Course Instructor**

The Lead Course Instructor is defined as the individual responsible for course scheduling, arrangement of assistant instructors, and documentation for the course.

- A. Certification by the Division of Fire Safety at the Driver/Operator level to be taught. The Driver/Operator certification requirement may be waived at the request of the Chief Officer of the authority having jurisdiction in the event no one on the department meets this requirement. It is then suggested that the instructor take the appropriate Fire Apparatus Driver/Operator certification exam with the class.
- B. Five years of experience with the fire service.
- C. Certification as a Fire Service Instructor I (or higher) with the Division of Fire Safety.
- D. Responsible for all training records, course applications and practical skills.
- E. Lead Course Instructor must meet all requirements listed in Section I of this booklet.



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***DRIVER/OPERATOR CERTIFICATION PROGRAM***

**VI. Applying for Testing and Certification**

- A. Applicants may apply for testing and certification by completing the enclosed "Fire Apparatus Driver/Operator Application for Testing and Certification" form. All parts must be completed for certification consideration.
  - 1. Part I - to be completed by Applicant, stating name and personal information
  - 2. Part II - to be completed by the Lead Instructor, indicating successful Driver/Operator course completion.
  - 3. Part III - to be completed by the Fire Chief, attesting that the applicant has met the criteria established by the Division of Fire Safety and NFPA 1002-1998.
- B. Applicant must complete an "Authorization for Release of Information" form (enclosed).
- C. Applicant must submit a copy of a certificate/training record verifying their successful completion of an approved Fire Apparatus Driver/Operator program. Documentation of successful completion of all practical skills must be submitted prior to certification being issued. Division of Fire Safety forms must be used for documentation.
- D. Applicant must provide verification of Fire Fighter I certification.



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*DRIVER/OPERATOR CERTIFICATION PROGRAM*

## **VII. Administration of Fire Apparatus Driver/Operator Certification Examination**

Fire Apparatus Driver/Operator Certification Examinations will be generated and administered at least twice annually by the Division of Fire Safety. For information regarding the scheduling of exams, please contact the Division of Fire Safety at (573)751-2930.

*SAMPLE TEST QUESTION*

- A fire apparatus with a primary purpose of transporting 1,000 gallons or more of water is considered to be a/an \_\_\_\_\_.
- a. attack pumper
  - b. aerial device
  - c. mini-pumper
  - d. tanker/tender

Applicants will have two hours to complete the 100 question, multiple-choice test for each level. Approximately two weeks following the exam, applicants will be notified by the Division as to whether they passed or failed the exam. The applicant must achieve a score of 70% on the exam in order to qualify for certification.

In the event that an applicant fails the examination, the applicant may apply to retake the examination within one year from original test date. Should an applicant fail the exam a second time, he or she will be required to attend 24-hours of approved driver/operator training and submit documentation of which to the Division of Fire Safety prior to taking the exam a third time.

Applicants must successfully pass all of the Division of Fire Safety's practical skills during the completion of an approved course.

Written certification exam dates and locations are listed on the Division website at <http://www.dfs.dps.mo.gov>.



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## *DRIVER/OPERATOR CERTIFICATION PROGRAM*

### **VIII. Applying for Driver/Operator Equivalency/Reciprocity**

For both Equivalency and Reciprocity, the candidate must mail in all documentation. Application must be original; all other documentation may be copies. The Division of Fire Safety will not accept any faxed or emailed applications.

#### Equivalency

Individuals not holding certification accredited by the International Fire Service Accreditation Congress (IFSAC) or the National Board on Fire Service Professional Qualifications (ProBoard) must comply with the following guidelines:

- A. Candidate must complete the appropriate application and attach supporting documentation.
- B. The candidate must be a member of a Missouri Fire Department and must have the signature of the Fire Chief in order to request reciprocity.
- C. Candidate must submit documentation of training and testing that complies with each component of the appropriate NFPA Standard for desired level of certification. Documentation must be dated within the last 5 years.
- D. Candidate must successfully pass the Division of Fire Safety's written exam with a minimum score of 70% for desired level of certification and practical skills exam, where applicable.
- E. Applicant must meet the general requirements for certification as outlined in the appropriate certification booklet.

#### Reciprocity

Individuals holding certification accredited by the International Fire Service Accreditation Congress (IFSAC) or the National Board on Fire Service Professional Qualifications (ProBoard) must comply with the following guidelines:

- A. Candidate must complete the appropriate application and attach supporting documentation.
- B. Certificates must clearly indicate IFSAC or ProBoard Accreditation for the level of certification.
- C. Provide the Division with written verification from the non-Missouri certifying authority that the applicant's certification is current, valid and in good standing.
- D. The candidate must be a member of a Missouri Fire Department and must have signature of the Fire Chief in order to request reciprocity
- E. Applicant must meet the general requirements for certification as outlined in the appropriate certification booklet.

The Missouri Division of Fire Safety Training Division will review and verify all documentation. Once documentation has been reviewed and verified to meet the certification criteria, the candidate will be issued reciprocity. If documentation does not meet the certification requirements, the candidate will be denied reciprocity. The candidate would then be required to complete an approved training program and meet all certification requirements including but not limited to, passing written and practical skills certification exams.



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***DRIVER/OPERATOR CERTIFICATION PROGRAM***

**IX. Saving Clause**

The qualifications developed in this program shall not be used to render invalid any rank, qualification or appointment acquired prior to the adoption of this program.

**X. Suspension, Revocation, or Denial**

The Director of the Division of Fire Safety may suspend, revoke, or deny certification to anyone when it is found that the individual:

- A. Has knowingly made a material misrepresentation of any information required for certification at any level offered by the Division of Fire Safety.
- B. Has knowingly by any means of false pretense, deception, fraud, misrepresentation or cheating, obtained training or certification.
- C. Has been convicted of or pleaded guilty to a felony.
- D. Fails to achieve a score of 70% on the Division of Fire Safety certification exam or pass all of the required practical skills.



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*DRIVER/OPERATOR CERTIFICATION PROGRAM*

## **XI. Appeal Process**

Upon the revocation or denial of a certification level, the decision may be appealed in writing to a Board of Appeals within 45 days of the date of the revocation or denial letter.

The Appeal Board will be made up of the following:

1. Two representatives of the Missouri Division of Fire Safety, Missouri Fire Safety Education/Advisory Commission appointed by the State Fire Marshal.
2. A representative of the Missouri Department of Public Safety appointed by the Department Director.

The Appeal Board may elect to:

- A. Deny the appeal without action
- B. Make a recommendation to the Director of the Division of Fire Safety from the written appeal
- C. Hold an informal appeal hearing with the individual revoked or denied certification

The Appeal Board shall notify the Director of the Division of Fire Safety and the individual submitting appeal within 90 day of receipt of the appeal.

Failure of any state certification exam **SHALL NOT** be grounds for an appeal.

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 To Test
Received By			Approved By
<b>Application for Testing and Certification</b>			

<b>Location for Testing:(see website for testing locations and dates)</b>	<b>Date of Testing</b>

<b>Personal Information:</b>				
Last 4 SSN #	Last Name	Suffix	First Name	M.I.
<b>Mailing Address of Applicant</b>			<b>City</b>	<b>State</b>
<b>Driver's License #</b>	<b>D.L. State</b>	<b>Personal Phone #</b> <input type="checkbox"/> Home <input type="checkbox"/> Cell	<b>Email Address</b>	
<b>Date of Birth</b>	<b>Sex</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>High School Diploma?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>GED?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>County of Residence</b>

<b>Current Agency Information:</b>			
<b>Agency Name</b>	<b>Phone #</b>	<b>Yrs of total Serv.</b>	<b>County</b>
<b>Street Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Agency Type</b>			
<input type="checkbox"/> Volunteer FD <input type="checkbox"/> Paid FD <input type="checkbox"/> Academy Student <input type="checkbox"/> Private <input type="checkbox"/> Other Local, State or Federal Agencies			

<b>Check the Certification Test(s) Applying For:</b>			
<b>Fire Protection</b>	<input type="checkbox"/> Firefighter I	<input type="checkbox"/> Firefighter II	<b>Was Firefighter II taken online?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Hazardous Materials</b>	<input type="checkbox"/> Awareness	<input type="checkbox"/> Operations	<b>Was HM Awareness online?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Fire Officer</b>	<input type="checkbox"/> Fire Officer I	<input type="checkbox"/> Fire Officer II	
<b>Fire Service Instructor</b>	<input type="checkbox"/> Level I	<input type="checkbox"/> Level II	
<b>Driver/Operator</b>	<input type="checkbox"/> Pumper		
<b>Fire Inspector</b>	<input type="checkbox"/>		
<b>Fire Investigator</b>	<input type="checkbox"/>		

**Have you ever forfeited bond, entered a plea of guilt or been convicted of any criminal offense (other than minor traffic offenses)?**

Yes  No

If yes, download a "Criminal Offense Statement" at  
[http://www.dfs.dps.mo.gov/documents/forms/MO\\_815-F0047.pdf](http://www.dfs.dps.mo.gov/documents/forms/MO_815-F0047.pdf)

**This form MUST be fully completed and submitted with this application.**

### Authorization for Release of Information

I, (Print Full Name) \_\_\_\_\_ hereby certify that all statements made on or in connection with this application are true and complete to the best of my knowledge and belief. I understand and agree that any misstatements or omissions of material facts will cause denial or forfeiture of my certifications.

I further authorize all law enforcement agencies, U.S. Military, Federal, State and/or Local government agencies to furnish the Missouri Division of Fire Safety, with any and all information regarding me in order to determine suitability for certification. I further release said agency or person from all liability for any damages whatsoever that may occur from furnishing such information to the Missouri Division of Fire Safety.

Also, by signing this form, I hereby authorize the release of any or all information concerning my enrollment status for the courses requesting certification and certification exam results only to the Chief Officer or his designee of my organization.

A photo-static copy of this authorization will be considered as effective and valid as the original.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

#### **To be completed by the Lead Instructor of a Division of Fire Safety Registered and Approved Course**

It is hereby confirmed that the above applicant has attended and successfully completed an approved course as checked above.

Location: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### **Hazardous Materials Levels & Fire Fighter I and II ONLY**

#### **To be completed by applicants Fire Chief, Academy Representative or Agency Supervisor**

I certify that the above applicant meets the physical and medical requirements set down by the \_\_\_\_\_ to perform the duties of the applicable NFPA standard. (Authority Having Jurisdiction)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Testing will be scheduled by the State Fire Marshal's Office, Training and Certification Unit.*

**COMPLETED APPLICATION MUST BE RECEIVED AND APPROVED PRIOR TO TESTING**

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 Course Delivery</b>				
<b>Location of Course</b>		<b>Start Date</b>	<b>Expected End Date</b>	<b>Est. # of Students</b>
<b>Agency Requesting Course</b>			<b>Agency Phone #</b>	
<b>Street Address</b>		<b>City</b>	<b>Zip Code</b>	<b>Region</b>
<b>Course to be Delivered:</b>		<b>Approved Curriculum to be used:</b>		
<input type="checkbox"/> Driver/Operator Pumper	<input type="checkbox"/> NFPA 1002-1998			
<input type="checkbox"/> Fire Instructor I	<input type="checkbox"/> NFPA 1041-2012			
<input type="checkbox"/> Fire Instructor II	<input type="checkbox"/> NFPA 1041-2012			
<input type="checkbox"/> Fire Officer I	<input type="checkbox"/> NFPA 1021-2009			
<input type="checkbox"/> Fire Officer II	<input type="checkbox"/> NFPA 1021-2009			
<b>Location of Course Records</b>		<b>Person Responsible for Student Records</b>		
<b>Course Lead Instructor Information: (type or print legibly)</b>				
<b>Last Name</b>	<b>First Name</b>	<b>Email Address</b>	<b>Phone Number</b>	
<b>Course Assisting Instructors' Information: (type or print legibly) Attach additional page if necessary</b>				
<b>Last Name</b>	<b>First Name</b>	<b>Email Address</b>	<b>Phone Number</b>	

**All completed practical skill packets must be submitted to the Division of Fire Safety.  
Only approved Division of Fire Safety skill packets will be accepted for certification.**

**Agency Rep Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Division of Fire Safety Use Only			
	Date	Initial	Notes:
Course Approved and Letter Sent			