



GENERAL ADMISSION APPLICATION

NEW MEXICO FIREFIGHTERS TRAINING ACADEMY

Phone: (575) 835-7500 – In-State Toll-Free: 1-800-734-6553
Please Print or Type and mail or fax to:
600 Aspen Road, Socorro, New Mexico 87801 • Fax: (575) 835-7506

SECTION I – COURSE INFORMATION

Course Title: _____

Course Dates: _____ Location: _____

Affiliation: NM Fire Department NM State Agency Other: _____

If above course requires completion of a prerequisite course or other requirements, copies of certificates or documents confirming eligibility must be included with application. Failure to do so will be cause for rejection.

SECTION II – APPLICANT INFORMATION

First Name: _____ Middle Name: _____ Last Name: _____

Date of Birth: _____ / _____ / _____ Male Female

Mailing Address: _____
P.O. Box or Street No. City State Zip Code

Home or Contact Phone: () _____ Work Phone: () _____ Fax: () _____

E-Mail Address: _____ Current Rank/Position/Title: _____

Have you been rejected for this course before because it was full? No Yes *If Yes, When?* _____

- For courses requiring physical activities, it is understood that the applicant may experience rigorous exercises that require physical fitness, strength and stamina. The applicant should be in compliance with *NFPA Standard 1582 Standard on Comprehensive Occupational Medical Program for Fire Departments*.

Do you have any medical condition or disability that would require special consideration during your attendance at the Fire Academy? No Yes *If yes, please give a full explanation on a separate page and attach to this application.*

SECTION III – FIRE DEPARTMENT/AGENCY INFORMATION

In order to receive Fire Department classification per the Selection Criteria Policy and a waiver of course fee, the applicant's Department Chief, Supervisor, or Supervising Officer must complete this section. Applicants who do not fill out this section will be classified "Unaffiliated" and subject to a course fee.

Department/Agency Name: _____

Department Mailing Address: _____

Department Phone Number: () _____ Department Fax: () _____

Chief or Training Officer: _____ Title: _____

E-Mail: _____ Phone: () _____

SECTION IV – LIABILITY AND WAIVER INFORMATION

This section must be read and signed by the applicant, and if applicable, by the Department Chief, Supervisor or Supervising Officer. (If Section III has been completed, this section must have both signatures. If application is not signed, it will be rejected.)

- The applicant is a member/employee of the department or organization listed (unless unaffiliated) and meets its minimum age and educational requirements. (The Fire Academy requires the applicant to be at least 18 years of age when the application is signed.)
- Information concerning enrollment and test scores will only be released to the student, the Fire Chief or Training Officer or his/her designee, and only at the discretion of the Fire Academy.
- The information provided is correct, and applicant agrees to abide by all Fire Academy rules, policies and regulations.
- For courses requiring the use of fire protective clothing, it is understood that the applicant must furnish his or her own clothing, that it is in good condition, and that it is in compliance with the applicable NFPA Standard at the time of purchase.
- It is understood that the Academy is not authorized to provide medical or health insurance for students. The individual and/or the organization must maintain appropriate insurance for the applicant.
- Any claims against the New Mexico Firefighters Training Academy or its employees or representatives for any injury as a result of participation in training and instruction are hereby waived.

FEE SCHEDULE

Course fees **will not apply** to those students who are members of New Mexico Municipal or County Fire Departments listed by the State Fire Marshal's Office as receiving state funding or on probation, or to those students who are employees of a New Mexico State Agency. General Admission Applications must include the applicant's signature, as well as the signature of the department chief, supervisor or supervising officer. Otherwise, the applicant will be considered unaffiliated and be charged the appropriate fee.

Course fees listed below **will apply** to foreign, federal, out-of-state and private-sector firefighters and to unaffiliated individuals. Affiliation must be indicated on the General Admission Application form. **Payment is due on the first day of the course and must be in the form of a cashier's check, money order or purchase order, made payable to the New Mexico Firefighters Training Academy. Cash, personal checks and credit cards will NOT be accepted. All course fees are non-refundable.**

Standard Course Fees:

One-day course	\$50.00	Four-day course	\$200.00
Two-day course	\$100.00	Five-day course	\$250.00
Three-day course	\$150.00	Ten-day course	\$500.00

Other Fees:

Certification Testing for Non-State Firefighters	\$50.00
Certification Re-Testing for Non-State Firefighters	\$50.00
Certification granted by Reciprocity	\$25.00 (per certificate)

PLEASE NOTE: Replacement certificates are not issued by the New Mexico Firefighters Training Academy.

I have read and understand the Liability and Waiver Information and I have read and understand the Fee Schedule.

Applicant

Date

Department Chief or Supervisor

Date

*****For Academy Use Only*****

Course Fee: No Yes Amount: \$ _____

Payment Received: No Yes

Cashier's Check # _____ Purchase Order # _____ Money Order # _____

Application Accepted Application Rejected – Reason: _____

Signature of Reviewer

Date