**FIRE FIGHTER I**
CERTIFICATION TEST
DOCUMENTATION BOOKLET

MSU Fire Services Training School
750 6th Street Southwest – Suite 205
Great Falls MT 59404-3297
Phone: (406) 761-7885
Fax: (406) 268-3735
Website: http://www.montana.edu/wwwfire

This certification process is accredited by:

International Fire Service Accreditation Congress (IFSAC)
and
National Board on Fire Service Professional Qualifications (Pro Board)
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Candidate's Name
First ___________ Middle ___________ Last ___________

Candidate's Home Address __________________________________________________________
________________________________________________________________________________

Phone Contact ____________________ Secondary Phone Contact ____________________

Name of Fire Service Organization (FSO) of which you are a member:
________________________________________________________________________________

Mailing Address of Fire Service Organization (FSO) of which you are a member:
________________________________________________________________________________

Name of the Chief of the Fire Service Organization (FSO) of which you are a member.
________________________________________________________________________________

Daytime phone contact for your Chief ____________________________________________

TEST INSTRUCTIONS (PLEASE READ CAREFULLY!)
A Fire Fighter 1 Candidate has an **18 month period** to complete this test. Once the FSTS administered portion of the test has begun, it must be completed **within 9 months**. This period begins with the first test date entered and ends with the last test date a skill was demonstrated and recorded. **Notification:** When testing is planned or scheduled, contact your local FSTS Field Trainer and give notice of the dates, times, and location of the testing. Occasionally, the FSTS Field Trainer is required to observe local testing to ensure compliance with accreditation and certification rules. Reference materials from any source may be used by the Candidate to complete the locally administered, open resource portions of the testing process. All answers in this test booklet must be hand written. The (FSTS) Fire Fighter 1 Coaching Package is a vital training tool for instructors teaching the tactical skills listed inside the rear cover. Other resources are listed after some test elements and are available from the FSTS Resource Center.

The Chief Officer (CEO) of your Fire Service Organization must sign off in the signature block under "Fitness Requirements" and “Facilities and Equipment Compliance” **before any testing begins.** An FSTS authorized test administrator, a certified instructor or Chief Officer of the Department who has a Proctor’s Affidavit on file with the FSTS must sign off each signature block and enter the date after witnessing your completion of each element. Every signature block must be signed and dated. The individual who conducts the test for an element and signs off a block, must be someone other than the
instructor the Candidate was trained and learned the skill from. Original signatures are required. The reference source cited after each element is the authoritative source for satisfactory performance. **Safety** - All of the performance elements/objectives shall be performed swiftly, safely, and with competence. Each element/objective shall be demonstrated in its entirety.

**Fitness Requirements**
The signature of the Chief of the Fire Service Organization is evidence to FSTS that the candidate has met local requirements with regard to good physical and mental condition and has a background indicating good moral character. The local chief should ensure that the candidate has an appropriate background and physical and mental condition prior to beginning this test. NFPA 1582 (*Medical Requirements for Fire Fighters*) is recommended for use by local authorities in assessing the physical and medical evaluation of candidates.

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**Chief Officer’s Signature**

**Date**

**Facilities and Equipment Compliance:**
The signature of the chief of the Fire Service Organization is evidence to FSTS that the facilities and equipment used for testing are in compliance with applicable NFPA Standards.

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**Chief Officer’s Signature**

**Date**

**Signature Verification:**
For the purpose of signature verification to sign off in this test booklet I certify my signature as:

**Signed:**

**Printed Name:**
If you have questions, contact the FSTS at (406) 761-7885 during office hours, or any of the following representatives:

Doug Lobaugh  (406) 750-6046  Great Falls
Terry Larson  (406) 868-0655  Billings
Jerry Prete  (406) 461-2274  Miles City
Craig Jeppson  (406) 498-5444  Missoula
Jon Campbell  (406) 407-1996  Kalispell
John Culbertson  (406) 771-4328  FSTS Office - Great Falls

Upon Completion of this Test Documentation Booklet, make a copy for your records, then give to an FSTS Staff Member OR send to FSTS via certified mail. FSTS Address: MSU Fire Services Training School - Certification Program, 750 6th Street SW–Ste 205, Great Falls, Montana 59404-3297

Duration of Certification:

Accredited certifications issued by the Montana Fire Services Training School do not have an expiration date. However, for purposes of progression within the FSTS certification system, a certification is recognized for five years from the test completion date. The policy regarding this is part of the Montana Fire Service Professional Qualifications Certification System, which is adopted by the Fire Services Training School Advisory Council. The policy is shown below.

304 Duration of Certification
304.1 Certifications issued under this system are recognized for purposes of progression within the system from the test completion date to the date a revised testing process is implemented by FSTS, however, certification will be recognized for progression purposes for a minimum of 5 years from its date of issuance.

304.2 Individuals with certifications which have lapsed under 304.1, are treated as new to the level or system and must be re-tested to the current standard for a given level.
**Definitions and Acronyms** - The following definitions and acronyms for the terms indicated are intended for use with the Certification Program.

**Approved** - Acceptable to the FSTS or their authorized representative.

**Authority having jurisdiction** - Fire Services Training School (FSTS).

**Candidate** - The person who has made application for certification.

**Define** - To describe the basic qualities and principles.

**Demonstrate** - To show by actual use or simulation.

**EAP** - Employee Assistance Program

**Fire company** - Subpart of FSO to which an individual is assigned.

**Fire department** - An agency of government charged with primary fire protection responsibility within a city, county, reservation or district.

**FSO** - Fire service organization.

**FSTS Website** – [http://www.montana.edu/wwwfire](http://www.montana.edu/wwwfire)

**Element** – A single item, task or tactic that is tested under this program.

**Identify** - To physically select, indicate, or explain verbally or in writing, using standard terms recognized by the fire service.

**IMS** - Incident Management System

**May** - The term is used to state a permissive use or an alternative method to a specified requirement.

**Objective** - A goal that is achieved through the attainment of a skill, knowledge, or both, which can be observed or measured.

**Qualified** - Having satisfactorily completed the requirements of the objectives.

**PAR** - Personnel Accountability Report

**PASS** - Personal Alert Safety System

**Safely** - To perform the objective without unreasonable risk or injury to self, others, apparatus or equipment.

**Shall** - The term indicates a mandatory requirement.

**Swiftly** - The time, as determined by the qualified evaluator or FSTS that it takes to perform the element satisfactorily.

**Technique** - The systematic procedure by which a task is accomplished.

**With competence** - Possessing the knowledge, skill, and judgment needed to perform indicated objectives satisfactorily.
Fire Fighter I - Locally Tested Portion
Administered by Local Chief Officer or Certified Instructor

5.1 General.
5.1.1 General Knowledge Requirements. (Resource: 6th Edition IFSTA ESSENTIALS of Fire Fighting and Fire Department Operations, Chapters 1,2,7,18; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed., Chapters 1, 2, 9)

Describe the organization of the fire department.
Candidate will provide a written narrative describing the operations and administrative staffing and duties of their Fire Service Organization (FSO).* Resource: Your FSO Leadership

___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

Signed________________________________________________ Date: ____/____/_____

Explain the Fire Fighter I's role as a member of the organization.
Candidate will provide a written narrative describing the role of fire fighter in their FSO.* Resource: Your FSO Leadership

___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

Signed________________________________________________ Date: ____/____/_____

8
Explain the mission of the fire service and of the local fire department.
Candidate will provide a narrative describing the mission of their FSO.* Resource: Your FSO Leadership

_____________________________________________________________________________

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_____________________________________________________________________________

Signed ___________________________________________________ Date: _____/____/_____ 

Explain the function of a standard operating procedure.
Candidate will provide a written narrative explaining the function of a standard operating procedure. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 1, NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 1)

_____________________________________________________________________________

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_____________________________________________________________________________

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_____________________________________________________________________________

Signed ___________________________________________________ Date: _____/____/_____ 

Explain fire department rules and regulations that apply to the Fire Fighter I.
Candidate will provide a written narrative which explains the rules and regulations that directly affect the Candidate. (The rules and regulations must, at a minimum, include the areas of duties and responsibilities, evaluation, and discipline.*) Resource: Your FSO Leadership

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________
Explain the value of fire and life safety initiatives in support of the fire department mission and to reduce fire fighter line-of-duty injuries and fatalities. 
Candidate will provide a written narrative explaining the value of fire and life safety initiatives as it relates to their fire service organization. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 21, NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 2)

Signed__________________________________________________ Date: ____/____/____

Explain the role of other agencies that may respond to emergencies. 
Candidate will provide a written narrative explaining the role of EMS, law enforcement and other fire agencies that may respond to emergencies. Resource: Your FSO Leadership

Signed__________________________________________________ Date: ____/____/____
Describe the aspects of a member assistance program. Candidate will provide a written narrative explaining the aspects of a member assistance program. Resource: Local EAP or EAP information packet from FSTS

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

Signed ___________________________________________________ Date: ____/_____/_____

Explain the importance of physical fitness and a healthy lifestyle to the performance of the duties of a firefighter. Candidate will provide a written narrative explaining the importance of physical fitness and a healthy lifestyle relating to the performance of the duties of a fire fighter. Resource: (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 2, NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 2)

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

Signed________________________________________________________ Date: ____/_____/_____

Describe the responsibilities of a fire fighter as required by NFPA 1500, Standard on Fire Department Occupational Safety and Health Program, and adopted by the Candidate's FSO. Candidate has been provided with a written copy of the FSO's responsibilities of fire fighters as required by NFPA 1500 and will provide a written narrative describing those responsibilities. (Resource: NFPA 1500, Standard on Fire Department Occupational Safety and Health Program, and leadership or procedures of FSO; Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 1&2; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. Chapter 2)

___________________________________________________________________________________
5.2 Fire Department Communications.

5.2.1 Initiate the response to a reported emergency, given the report of an emergency, fire department standard operating procedures, and communications equipment, so that all necessary information is obtained, communications equipment is operated correctly, and the information is promptly and accurately relayed to the dispatch center. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 3 NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 4)

Candidate has initiated the response to a reported emergency.

Signed ___________________________ Date: ____/_____/_____

5.2.2 Receive a business or personal telephone call, given a fire department business phone, so that procedures for answering the phone are used and the caller's information is relayed. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 3; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 4) Candidate has demonstrated receiving a business or personal telephone call.

Signed ___________________________ Date: ____/_____/_____

5.3 Fireground Operations.

5.3.3 Establish and operate in work areas at emergency scenes, given protective equipment, traffic and scene control devices, structure fire and roadway emergency scenes, traffic hazards and downed electrical wires, an assignment, and SOPs, so that procedures are followed, protective equipment is worn, protected work areas are established as directed using traffic and scene control devices, and the fire fighter performs assigned tasks only in established, protected work areas.

Signed ___________________________ Date: ____/_____/_____

5.3.7 Attack a passenger vehicle fire operating as a member of a team, given personal protective equipment, attack line, and hand tools, so that hazards are avoided, leaking flammable liquids are identified and controlled, protection from flash fires is maintained, all vehicle compartments are overhauled, and the fire is extinguished. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 17; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 22)

Signed ___________________________ Date: ____/_____/_____
5.3.8 Extinguish fires in exterior Class A materials, given fires in stacks or piles, small unattached structures or storage containers that can be fought from the exterior, attack lines, hand tools and master stream devices, and an assignment, so that exposures are protected, the spread of fire is stopped, collapse hazards are avoided, water application is effective, the fire is extinguished, and signs of the origin area(s) and arson are preserved. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 17; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS 3rd Ed. CH 22)

Signed___________________________________________________ Date: ____/_____/_____  

5.3.10 Attack an interior structure fire operating as a member of a team, given an attack line, ladders when needed, personal protective equipment, tools, and an assignment, so that team integrity is maintained, the attack line is deployed for advancement, ladders are correctly placed when used, access is gained into the fire area, effective water application practices are used, the fire is approached correctly, attack techniques facilitate suppression given the level of the fire, hidden fires are located and controlled, the correct body posture is maintained, hazards are recognized and managed, and the fire is brought under control. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 17; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 22)

Signed___________________________________________________ Date: ____/_____/_____  

5.3.13 Overhaul a fire scene, given personal protective equipment, attack line, hand tools, a flashlight, and an assignment, so that structural integrity is not compromised, all hidden fires are discovered, fire cause evidence is preserved, and the fire is extinguished. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 18; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 19)

Signed___________________________________________________ Date: ____/_____/_____  

5.3.14 Conserve property as a member of a team, given salvage tools and equipment and an assignment, so that the building and its contents are protected from further damage. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 18; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 19)

Signed___________________________________________________ Date: ____/_____/_____  

5.3.15 Connect a fire department pumper to a water supply as a member of a team, given supply or intake hose, hose tools, and a fire hydrant or static water source, so that connections are tight and water flow is unobstructed. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 15; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 16)

Signed___________________________________________________ Date: ____/_____/_____  

5.3.16 Extinguish incipient Class A, Class B, and Class C fires, given a selection of portable fire extinguishers, so that the correct extinguisher is chosen, the fire is completely extinguished, and correct extinguisher-handling techniques are followed. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 7; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed CH 8)

Signed___________________________________________________ Date: ____/_____/_____
5.3.17 Illuminate the emergency scene, given fire service electrical equipment and an assignment, so that designated areas are illuminated and all equipment is operated within the manufacturer’s listed safety precautions. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 10; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 19)

Signed___________________________________________________ Date: ___/___/____

5.3.19 Combat a ground cover fire operating as a member of a team, given protective clothing, SCBA if needed, hose lines, extinguishers or hand tools, and an assignment, so that threats to property are reported, threats to personal safety are recognized, retreat is quickly accomplished when warranted, and the assignment is completed. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops CH 17; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 21)

Signed___________________________________________________ Date: ___/___/____

5.3.20 Ropes and Knots
(Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., Chapter 8; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. Chapter 10)

Explain the primary usage of each of the following:

1) bowline _____________________________________________________________

2) clove hitch __________________________________________________________

3) figure eight on a bight ________________________________________________

4) half hitch ___________________________________________________________

5) becket or sheet bend _________________________________________________

6) safety knot __________________________________________________________

Given each of the following situations, describe the types of knots to use:

Hoist a 14’ roof ladder to a third floor roof:

__________________________________________________________________

To hoist a Pike Pole to a roof: ____________________________________________

Signed _____________________________________________________ Date: ___/___/____
**Distinguish between life safety and utility ropes.**
Candidate will provide a written narrative explaining the characteristics and uses of life safety and utility ropes. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 8, NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 10)

<table>
<thead>
<tr>
<th>Candidate will provide a written narrative explaining the characteristics and uses of life safety and utility ropes.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 8, NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 10)</td>
</tr>
</tbody>
</table>

Signed ________________________________ Date: ___/_____/_____

Candidate will provide a written explanation of the reasons for placing a rope out of service. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 8, NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 10)

<table>
<thead>
<tr>
<th>Candidate will provide a written explanation of the reasons for placing a rope out of service.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 8, NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 10)</td>
</tr>
</tbody>
</table>

Signed ________________________________ Date: ___/_____/_____

15
Given the proper size and amount of rope the Candidate has demonstrated each of the following:

(Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 8, NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 10)

**Bowline:**
Signed ____________________________________________________ Date: ___/____/_____

**Clove hitch:**
Signed ____________________________________________________ Date: ___/____/_____

**Figure of Eight on the Bight:**
Signed ____________________________________________________ Date: ___/____/_____

**Becket or Sheet Bend:**
Signed ____________________________________________________ Date: ___/____/_____

**Safety Knot:**
Signed ____________________________________________________ Date: ___/____/_____

Candidate has demonstrated tying approved knot and hoisting tool at least 10 feet.
(Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 8, NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 10)

Signed ____________________________________________________ Date: ___/____/_____

Candidate has demonstrated using a rope to tie ladders, hose and other objects to secure them.
(Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 8, NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 10)

Signed ____________________________________________________ Date: ___/____/_____

### 5.5 Preparedness and Maintenance

5.5.1 Clean and check ladders, ventilation equipment, self-contained breathing apparatus (SCBA), ropes, salvage equipment, and hand tools, given cleaning tools, cleaning supplies, and an assignment, so that equipment is clean and maintained according to manufacturer's or departmental guidelines, maintenance is recorded, and equipment is placed in a ready state or reported otherwise. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 2;9;13;15;19)

Signed ____________________________________________________ Date: ___/____/_____

5.5.2 Clean, inspect, and return fire hose to service, given washing equipment, water, detergent, tools, and replacement gaskets, so that damage is noted and corrected, the hose is clean, and the equipment is placed in a ready state for service. (Resource: 6th Ed. IFSTA ESSENTIALS of FF and FD Ops., CH 15; NFPA/IAFC FUNDAMENTALS OF FIRE FIGHTER SKILLS, 3rd Ed. CH 170)

Signed ____________________________________________________ Date: ___/____/_____

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4.2 Recognition and Identification

4.2.1(a). Use scenario #1 on the FSTS Website to complete the following. Check the boxes and fill
in the blanks. Use N/A for not applicable. Do not leave blank boxes or lines.
(Reference: 2016 Emergency Response Guidebook, IFSTA Essentials of Fire Fighting pp 1326-1405, 1421-1470, Montana Fire Services
Mutual Aid, Command, and Field Operations Guide)

Call type:____________________________________________________________________________________
Location:_________________________________________________________________________________
Occupancy:____________________________________________________________________________________
Actual release:
□ Yes (see ERG, Page 1),
□ No
□ Unknown

Product name and/or ID #________________________________________________________________________

Potential Hazards:
□ Fire
□ Explosion
□ Health
□ Other

Exposed or Potentially exposed population:
□ Yes (□ near by school, □ extended care facility, □ multi family, □ other___________________________)
□ No

Container Type________________________________________________, ERG container page____________
Hazard Class/Division ____________________________, ERG Hazard Classification page________________

Actual conditions:
Temperature__________________________________________________________________________________
Wind; direction________________________________________, speed_______________________________
Slope (towards/away from people/storm drains etc)__________________________________________
Others on the site___________________________________________________________________________
Criminal or Terrorist activity possible?: □ Yes  (□ Secondary devices considered)  □ No;
Initial isolation distances (Use ERG)_______________________________________________________________
Scene/Access Control Plan:
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
Evacuation required
□ Yes
□ No
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
Signed___________________________________________________ Date: ____ / ____ / _____

4.2.1(b). Use scenario #2 on the FSTS Website to complete the following. Check the boxes and fill in the blanks. Use N/A for not applicable. Do not leave blank boxes or lines.

Call type:____________________________________________________________________________________
Location:____________________________________________________________________________________
Occupancy:___________________________________________________________________________________
Actual release:
□ Yes (see ERG, Page 1),
□ No
□ Unknown
Product name and/or ID # ________________________________________________________________
Potential Hazards:
- Fire
- Explosion
- Health
- Other

Exposed or Potentially exposed population:
- Yes (☐ near by school, ☐ extended care facility, ☐ multi family, ☐ other_________________________)
- No

Container Type_____________________________________________________________, ERG container page_________________

Hazard Class/Division_________________________________________________________, ERG Hazard Classification page_________________

Actual conditions:
- Temperature_______________________________________________________________
- Wind; direction______________________, speed___________________________
- Slope (towards/away from people/storm drains ect)____________________________
- Others on the site__________________________________________________________

Criminal or Terrorist activity possible?: ☐ Yes (☐ Secondary devices considered) ☐ No;

Initial isolation distances (Use ERG)____________________________________________

Scene/Access Control Plan:
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

Evacuation required
- Yes
- No

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

Signed___________________________________________________ Date: ___/___/____
4.2.1(c). Draw the NFPA 704 Marking system and indicate the appropriate color of each diamond and the meaning of the color, symbol and number in same.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, pp 1369-70)

Signed___________________________________________________ Date: ____/_____/_____

4.2.1(d). Refer to Scene 1 on the FSTS website. Name and describe this type of marking system and list the hazards shown on this container.

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Signed __________________________________________________ Date: ____/_____/_____
4.2.1(e). Describe the types of pipelines used to transport hazardous materials and the information found on pipeline markers.

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Signed ____________________________________________ Date:_____/_____/_____

4.2.1(f). Describe where shipping papers are found on different modes of transportation (road, rail, aviation, marine).
(Resource: 2016 Emergency Response Guidebook, inside front cover, 6th Ed. IFSTA Essentials of Fire Fighting pp 137-78)

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Signed ____________________________________________ Date:_____/_____/_____

4.2.1(g). Describe the information provided on shipping papers.
(Resource: 2016 Emergency Response Guidebook, inside front cover, 6th Ed. IFSTA Essentials of Fire Fighting pp 137-78)

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Signed ____________________________________________ Date:_____/_____/_____
4.2.1(h). Describe the information provided on safety data sheets and where they are typically found.
(Recipe 2016 Emergency Response Guidebook, inside front cover, 6th Ed. IFSTA Essentials of Fire Fighting pp 1377-78)

5.2 Identify Potential Hazards

5.2.1(a). Use scenario #3 on the FSTS Website to complete the following. Check the boxes and fill in the blanks. Use N/A for not applicable. Do not leave blank boxes or lines.

Call type:____________________________________________________________________________________
Location:____________________________________________________________________________________
Occupancy:________________________________________________
Actual release
☐ Yes (see ERG, Page 1),
☐ No
☐ Unknown

Product name and/or ID # __________________________________________________________

Potential Hazards
☐ Fire
☐ Explosion
☐ Health
☐ Other________________________________________________________

Exposed or Potentially exposed population
☐ Yes (☐ near by school, ☐ extended care facility, ☐ multi family, ☐ other________________________)
☐ No

Container Type________________________________________________________, ERG container page________

Hazard Class/Division __________________________________________, ERG Hazard Classification page________
Actual conditions

Temperature_____________________________________
Wind; direction___________________________________, speed_____________________________
Slope (towards/away from people/storm drains etc)_____________________________________
Others on the site_______________________________________________________________


☐ Solid  ☐ Liquid  ☐ Gas

Flammable  ☐ Yes, LEL_____, UEL_____,  ☐ No

Flash Point_________; Auto Ignition temp_________; Boiling Point_________

Will it  ☐ Rise or ☐ Sink
Vapor Density (or Relative Gas Density)_____________________
Specific Gravity (for liquids only)_________________________
Mix with water ☐ Yes_____% soluble  ☐ No

Will it ☐ Persist or ☐ Dissipate on its own, Vapor Pressure_______________

Radioactive ☐ Yes, type and packaging__________________________________________;  ☐ No

Reactivity/Incompatibilities___________________________________________________

Risk Analysis
Credible information that a savable life exists
☐ Yes, take only highly calculated measures within the safety system of the incident to do a rescue.
☐ No, defensive operations only.

Criminal or Terrorist activity:
☐ Yes

Indicators
☐ Chemical_______________________________________________________________
☐ Biological_____________________________________________________________
☐ Radiological___________________________________________________________
☐ Illicit Lab______________________________________________________________
☐ Explosives_____________________________________________________________
☐ Other_________________________________________________________________

☐ Secondary devices considered
☐ No
5.2.1(b). Use scenario #4 on the FSTS Website to complete the following. Check the boxes and fill in the blanks. Use N/A for not applicable. Do not leave blank boxes or lines.


Call type:______________________________________________________________

Location:____________________________________________________________

Occupancy:__________________________________________________________

Actual release
☐ Yes (see ERG, Page 1),
☐ No
☐ Unknown

Product name and/or ID # ____________________________________________

Potential Hazards
☐ Fire
☐ Explosion  
☐ Health  
☐ Other

Exposed or Potentially exposed population
☐ Yes (☐ near by school, ☐ extended care facility, ☐ multi family, ☐ other_________________________)
☐ No

Container Type________________________________________________, ERG container page______________

Hazard Class/Division ________________________________, ERG Hazard Classification page______________

Actual conditions
Temperature________________________________________________________
Wind; direction_______________________________, speed________________________________
Slope (towards/away from people/storm drains ect)__________________________________________
Others on the site______________________________________________________________________


☐ Solid ☐ Liquid ☐ Gas

Flammable ☐ Yes, LEL______, UEL______,
☐ No

Flash Point_________; Auto Ignition temp_________; Boiling Point__________

Will it ☐ Rise or ☐ Sink
  Vapor Density (or Relative Gas Density)_______________
  Specific Gravity (for liquids only)____________________
  Mix with water ☐Yes_____% soluble ☐No

Will it ☐ Persist or ☐ Dissipate on its own, Vapor Pressure______________

Radioactive ☐ Yes, type and packaging______________________________________________; ☐ No

Reactivity/Incompatibilities____________________________________________

Risk Analysis
Credible information that a savable life exists
☐ Yes, take only highly calculated measures within the safety system of the incident to do a rescue.
☐ No, defensive operations only.

Criminal or Terrorist activity:
☐ Yes
  Indicators
  ☐ Chemical__________________________________________________________

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☐ Biological

☐ Radiological

☐ Illicit Lab

☐ Explosives

☐ Other

☐ Secondary devices considered

☐ No

Initial isolation distances (Use ERG)

Scene/Access Control Plan

Evacuation required

☐ Yes

☐ No


Required PPE

Emergency Decon Established

☐ Yes; Location

☐ No (not needed)

Signed ________________________________ Date: _____ / ____ / ____

5.2.1(c). Use scenario #5 on the FSTS Website to complete the following. Check the boxes and fill in the blanks. Use N/A for not applicable. Do not leave blank boxes or lines.


Call type: __________________________________________

Location: __________________________________________

Occupancy: __________________________________________
Actual release
☐ Yes (see ERG, Page 1),
☐ No
☐ Unknown

Product name and/or ID # ________________________________________________________________

Potential Hazards
☐ Fire
☐ Explosion
☐ Health
☐ Other ________________________________________________________________

Exposed or Potentially exposed population
☐ Yes (☐ near by school, ☐ extended care facility, ☐ multi family, ☐ other __________________________) 
☐ No

Container Type________________________________________________, ERG container page________

Hazard Class/Division ____________________________________________________________________, ERG Hazard Classification page________

Actual conditions
Temperature______________________________________________________________
Wind; direction___________________________________________________________
Slope (towards/away from people/storm drains ect)____________________________________
Others on the site________________________________________________________


☐ Solid ☐ Liquid ☐ Gas

Flammable ☐ Yes, LEL______, UEL______,
☐ No

Flash Point________; Auto Ignition temp________; Boiling Point________

Will it ☐ Rise or ☐ Sink
Vapor Density (or Relative Gas Density)____________________
Specific Gravity (for liquids only)________________________
Mix with water ☐ Yes_____% soluble ☐ No

Will it ☐ Persist or ☐ Dissipate on its own, Vapor Pressure____________

Radioactive ☐ Yes, type and packaging_____________________________________________; ☐ No

Reactivity/Incompatibilities__________________________________________________________
Risk Analysis

Credible information that a savable life exists

☐ Yes, take only highly calculated measures within the safety system of the incident to do a rescue.
☐ No, defensive operations only.

Criminal or Terrorist activity:

☐ Yes

Indicators

☐ Chemical

☐ Biological

☐ Radiological

☐ Illicit Lab

☐ Explosives

☐ Other

☐ Secondary devices considered

☐ No

Initial isolation distances (Use ERG)

Scene/Access Control Plan

Evacuation required

☐ Yes

☐ No


Required PPE

Emergency Decon Established

☐ Yes; Location

☐ No (not needed)

Signed ____________________________ Date: ___/___/___
5.2.1(d). Use scenario #6 on the FSTS Website to complete the following. Check the boxes and fill in the blanks. Use N/A for not applicable. Do not leave blank boxes or lines.


Call type:________________________________________________________
Location:________________________________________________________
Occupancy:________________________________________________________

Actual release
☐ Yes (see ERG, Page 1),
☐ No
☐ Unknown

Product name and/or ID #____________________________________________

Potential Hazards
☐ Fire
☐ Explosion
☐ Health
☐ Other___________________________________________________________

Exposed or Potentially exposed population
☐ Yes (☐ near by school, ☐ extended care facility, ☐ multi family, ☐ other_________________________)
☐ No

Container Type______________________________________________________, ERG container page___________

Hazard Class/Division______________________________________________, ERG Hazard Classification page___________

Actual conditions
Temperature________________________________________________________

Wind; direction______________________________________________, speed________________________
Slope (towards/away from people/storm drains ect)________________________

Others on the site___________________________________________________


☐ Solid ☐ Liquid ☐ Gas

Flammable ☐ Yes, LEL______, UEL______,
☐ No

Flash Point__________; Auto Ignition temp__________; Boiling Point___________

Will it ☐ Rise or ☐ Sink
Vapor Density (or Relative Gas Density)___________________________
Specific Gravity (for liquids only)__________________
Mix with water ☐ Yes _____% soluble ☐ No

Will it ☐ Persist or ☐ Dissipate on its own, Vapor Pressure_______________

Radioactive ☐ Yes, type and packaging_____________________________________; ☐ No

Reactivity/Incompatibilities________________________________________________

Risk Analysis
Credible information that a savable life exists
☐ Yes, take only highly calculated measures within the safety system of the incident to do a rescue.
☐ No, defensive operations only.

Criminal or Terrorist activity:
☐ Yes
Indicators
☐ Chemical______________________________________________________________
☐ Biological____________________________________________________________
☐ Radiological__________________________________________________________
☐ Illicit Lab____________________________________________________________
☐ Explosives____________________________________________________________
☐ Other_______________________________________________________________

☐ Secondary devices considered
☐ No

Initial isolation distances (Use ERG)__________________________________________
Scene/Access Control Plan
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Evacuation required
☐ Yes
☐ No

Required PPE

Emergency Decon Established

☐ Yes; Location
☐ No (not needed)

Signed ___________________________ Date: _____/_____/_____

5.3 Identify Action Options

5.3.1(a). Describe types of contamination and the difference between exposure and contamination.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, p 1482)

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Signed ___________________________ Date: _____/_____/_____

5.3.1(b). Describe the routes of entry of hazardous materials to the human body.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, p 1312)

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Signed ___________________________ Date: _____/_____/_____
5.3.1(c). Describe the types of decontamination.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, pp 1481-86)

____________________________________________________________________________________

____________________________________________________________________________________

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____________________________________________________________________________________

Signed __________________________________________________ Date: _____ / ____ / ____

5.1.3(d). Describe the purpose, advantages, and limitations of emergency decontamination.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, pp 1482-83)

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Signed __________________________________________________ Date: _____ / ____ / ____
5.4 Action Plan Implementation

5.4.1(a). Describe the protective action options of evacuation and sheltering-in-place.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, pp 1478-80)

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5.4.1(b). Describe heat disorders that personnel may experience on scene.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, p 1461)

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Signed ___________________________ Date: ___ / ___ / ___

6.2 Mission Specific: Personal Protective Equipment

6.2.1(a). Describe the importance of working under a hazardous materials technician, an allied professional, an emergency response plan, or standard operating procedures when selecting and using PPE at a mission specific incident.
6.2.1(b). Describe the types and capabilities of PPE available for thermal, radiological, asphyxiating, chemical and biological hazards.  
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, pp 1442-58)
6.2.1(c). Describe the limitations of hazmat PPE to include permeation, penetration, degradation, and physical.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, pp 1452-54)

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Signed ______________________  Date:_____/_____/_____

6.2.1(d). Describe donning, doffing, and usage procedures of specialized hazmat PPE.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, pp 1442-58)

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Signed ___________________________________________  Date:_____/_____/_____

6.2.1(e). Describe procedures for inspection, maintenance and storage of hazmat PPE.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, pp 1465)

6.6 Mission Specific: Product Control

6.6.1(a) Describe the following;
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, pp 1430, 1486-94)

Control:

Confinement:

Containment:

Extinguishment:

Signed ____________________________ Date: ____/____/____
6.6.1(b). Describe nine product control methods and the safety precautions associated with each.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, pp 1486-93)

Signed ______________________ Date: _____ / _____ / _____
6.6.1(c). Describe the location and operation of remote/emergency shutoff valves of cargo tanks and facilities that contain flammable liquids and gases.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, pp 1493-94)

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Signed ___________________________ Date: ____/____/_____

6.6.1(d). Describe the characteristics and applicability of foam and absorbents as product control agents.
(Resource: 6th Ed. IFSTA Essentials of Fire Fighting, pp 1489,1493)

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Signed ___________________________ Date: ____/____/_____

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PROCTOR'S AFFIDAVIT

Note: This form may be duplicated so each proctor has one to file.

Date:_____________

Proctor's Name__________________________________

By my signature, I hereby agree to administer testing for Montana State University - Fire Services Training School in a professional manner, with integrity, and in compliance with the letter and spirit of the regulations governing the operation of the Montana Professional Qualifications Certification System. I also certify that I have not been involved in the training of the candidate(s) for the skills which I am testing. I understand that any breach of this commitment will result in my immediate dismissal and possible legal action against me.

____________________________________________
Proctor's Signature

____________________________________________
Witness

**** PROCTOR IN-SERVICE TRAINING ****

Location of Training:______________________________

Lead Instructor:____________________________________

Date of Training:_____/_____/______
FSTS Tested Portion - Fire Fighter I Tactics

This page provides documentation for completion of the tactics required for Fire Fighter 1 certification. **Each Tactic must be signed off by a representative of the FSTS.** Other signatures will not be accepted on this page. Bring this Booklet with you when testing and be sure to have the appropriate sections completed by the evaluators **before** they leave the test site.

Exterior/Interior Fire Tactic as Fire Fighter A
**Evaluator**________________________  **Date**________________________
Exterior/Interior Fire Tactic as Fire Fighter B
**Evaluator**________________________  **Date**________________________

Enter/Isolate/Search 2\(^{nd}\) Story Tactic as Fire Fighter A
**Evaluator**________________________  **Date**________________________
Enter/Isolate/Search 2\(^{nd}\) Story Tactic as Fire Fighter B
**Evaluator**________________________  **Date**________________________

Fire Fighter Rescue as Fire Fighter A
**Evaluator**________________________  **Date**________________________
Fire Fighter Rescue as Fire Fighter B
**Evaluator**________________________  **Date**________________________

Flat Roof Access as Fire Fighter A
**Evaluator**________________________  **Date**________________________
Flat Roof Access as Fire Fighter B
**Evaluator**________________________  **Date**________________________

Pitched Roof Access as Fire Fighter A
**Evaluator**________________________  **Date**________________________
Pitched Roof Access as Fire Fighter B
**Evaluator**________________________  **Date**________________________

Hazmat Control Line, Remote Shutoff, Confinement, and Decontamination

Fire Fighter A
**Evaluator**________________________  **Date**________________________
Fire Fighter B
**Evaluator**________________________  **Date**________________________
Fire Fighter C
**Evaluator**________________________  **Date**________________________
PASS Activation
- Candidate has demonstrated the ability to activate PASS device, using only 1 hand to access and activate it and with obscured vision. Candidate must do so lying on their front and back, and demonstrate both activating and deactivating the device.

Evaluator____________________ Date____________________

Mayday Radio Traffic
- Candidate must demonstrate the ability to transmit mayday radio traffic in an emergency given a portable radio in full PPE and SCBA. Candidate must include who, what happened, where, and current air supply in the radio transmission. Candidate must demonstrate ability to cancel PASS alarm during the radio transmission. Candidate must utilize proper communication technique (closed loop). Candidate must perform skill lying on the floor with obscured vision.

Evaluator____________________ Date____________________