

# IFSAC VERIFICATION FORM

## To be completed by Applicant

Full Name: \_\_\_\_\_ DOB(mm/dd/yyyy): \_\_\_\_\_

Certifying State or Entity: \_\_\_\_\_

FIDO Account Number: \_\_\_\_\_

## To be completed by the entity

### IFSAC Seals by level:

Please verify the unexpired and current seals below by adding the IFSAC seal number, status, and issue date below. If a seal is implied by another, please mark the status with an "I" in the additional field provided. If it is Registered, please indicate this with an "R." For example, if the individual has a Hazmat Awareness seal implied in his Operations seal, this will require an I next to the Awareness level and an R for Operations.

Seal Number (All that apply): \_\_\_\_\_ Status (I) or (R): \_\_\_\_\_ Issue Date: \_\_\_\_\_

Firefighter I: \_\_\_\_\_

Firefighter II: \_\_\_\_\_

HazMat Awareness: \_\_\_\_\_

HazMat Operations: \_\_\_\_\_

(Must include Mission specifics for PPE and Product Control)

HazMat Technician: \_\_\_\_\_

HazMat Incident Commander: \_\_\_\_\_

Aircraft Rescue Firefighter: \_\_\_\_\_

Driver/Operator Pumper: \_\_\_\_\_

Driver/Operator Aerial: \_\_\_\_\_

Fire Instructor I: \_\_\_\_\_

Fire Instructor II: \_\_\_\_\_

Fire Instructor III: \_\_\_\_\_

Fire Inspector I: \_\_\_\_\_

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Fire Inspector II: \_\_\_\_\_

Plans Examiner I: \_\_\_\_\_

Fire Officer I: \_\_\_\_\_

Fire Officer II: \_\_\_\_\_

Fire Officer III: \_\_\_\_\_

Fire Officer IV: \_\_\_\_\_

Fire Investigator: \_\_\_\_\_

Incident Safety Officer: \_\_\_\_\_

Fire Life Safety Educator I: \_\_\_\_\_

Fire Life Safety Educator II: \_\_\_\_\_

Rope Rescue Awareness: \_\_\_\_\_

Rope Rescue Operations: \_\_\_\_\_

Rope Rescue Technician: \_\_\_\_\_

Additional Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Sign below:**

Individual Signing for Agency: \_\_\_\_\_

Role At Agency: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Contact Email: \_\_\_\_\_

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

# IFSAC VERIFICATION FORM

## Instructions Page:

This form is to be completed by the certifying agency that issued your transferring IFSAC seals. Please fill out the top portion that is indicated with “to be completed by the applicant.”

**Certifying entities:** Please fill out the bottom portion. Please note we may reach out to verify the signature of the individual by either emailing the address on file, or utilizing the IFSAC CA Directory. Please note that all seals verified must have been tested as a hands on skills exam and a written comprehension exam.

**Seal Numbers:** Please add the seal number for all IFSAC seals issued by your agency.

**Registered or implied:** Please add an R for all seals that are single or the highest level in dual seals. Ex. If you issue a combined seal for Hazmat AWS and OPS, OPS will be the registered seal, and AWS will be implied.

**Date Issued:** Please add the date that the IFSAC seal was issued to the individual.

**Signature:** Please fill out the contact information and sign. Forms that do not have this portion filled out will be denied.

## **Military/ DOD applicants**

If you are registering DOD IFSAC seals you will need to fill out the bottom section yourself (seal number and date received) and send it to the DOD IFSAC coordinator directly. You can find their email on the IFSAC website under the CA member directory. Link to IFSAC: <https://ifsac.org/> Please submit your seal and the filled out application, after you have sent it to DOD. The coordinator will send the signed form to us directly. If we have not received your application back from DOD within a week you will be automatically denied and requested to resend the form to the DOD coordinator.

## **HOW TO SUBMIT:**

**Please submit this with EACH seal you submit to your FIDO account. Each application will need to have this completed form and the seal you are applying for.**