



# The ACADEMY

South Bay Regional Public Safety Training Consortium  
 3095 Yerba Buena Road, San Jose, CA 95135 ♦ Phone (408) 270-6458 ♦ Fax (408) 238-0286

## Firefighter 1 Academy Application / Cover Sheet

Last Name, First Name		Birthdate (mm/dd/yyyy)		Social Security #	
Address		City		State	Zip Code
Email		Cell Phone		Home Phone	
Emergency Contact Name		Relationship to Student		Cell Phone	
Medical Insurance Provider	Policy #	Group #		Member I.D. #	
Interested in Financial Aid?	US Citizen?	California Resident?		Driver's License/I.D. #	

### STAFF USE ONLY

	College Application	<input type="checkbox"/>
	CDL / ID Copy	<input type="checkbox"/>
	Medical Insurance Copy	<input type="checkbox"/>
	PT Gear Order	<input type="checkbox"/>
	Medical Evaluation / Date	<input type="checkbox"/>
	Patches (2 South Bay / 2 Rocker)	<input type="checkbox"/>
	Informed of Cancellation Policy	<input type="checkbox"/>
	Paid:	
	Balance:	
	File Completed / Date:	
	Notes / Comments:	
	<b>Cal Fire Requirements (Title 22)</b>	
		EMS - CPR/AED Public Safety
		Emergency Medical Responder or EMT Or EMS - Public Safety First Aid *EMS - Child and Elder Abuse *EMS - Communicable Disease Awareness *EMS - Sudden Infant Death Syndrome