

**DPSST Use Only**  
 LEDS Check:  OK  
 Approved: \_\_\_\_\_  
 \_\_\_\_\_  
 Rejected: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 By: \_\_\_\_\_

OREGON DEPARTMENT OF PUBLIC SAFETY  
 STANDARDS AND TRAINING



**Professional Fire Instructor Certification**  
**Application to Instruct an**  
**Approved DPSST Course**  
 (Revised 4/09)

**Failure to complete ALL fields WILL result in the rejection of this application.  
 It will be mailed back to you with a letter of explanation.**

Last Name, First Name, M.I.	Social Security Number (Preferred)	DPSST Fire Number	DOB (Mandatory)
Agency or Company Name			
Applicant Mailing Address	City	State	Zip Code
Primary Phone	Secondary Phone	Fax Number	Email Address (optional)

1. Certified course number(s) you're applying to instruct: \_\_\_\_\_

Certified course numbers are available on our website at <http://www.oregon.gov/DPSST/FC/index.shtml>.

**2. If the Provider listed is a Fire Agency (Fire Department) you must attach written consent to use their curriculum.**

3. Are you certified as an NFPA Fire Instructor I?  Yes  No

**If NO, please attach your Professional Instructor Resume.**

4. Are you DPSST certified in the level(s) requesting to instruct?  Yes  No

**If NO,**

Have you taken and completed the course(s) requesting to instruct? **Attach proof.**  Yes  No

**If NO, please attach your experience with the subject(s), Professional Instructor Resume and Completion Certificate(s).**

5. Optional:  Yes, I would like to have my Approval Letter, NOCC and Roster sent to my email address, ***instead*** of receiving hard copies in the mail. *(please provide email address in the section above)*

**I have reviewed this application for completeness and accuracy. I understand that falsification of information on this document is subject to penalty under ORS 162.055, et al. and ORS 162.305 and is cause to deny or revoke DPSST certification. Please refer to OAR 259-009-0080.**

Applicant Signature	Applicant Name (Please Print)	Date
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Submit to:  
 Department of Public Safety Standards and Training  
 Attn: Fire Certification  
 4190 Aumsville Hwy SE, Salem, OR 97317  
 Phone: (503) 378-2100 Fax: (503) 378-4600

**NOTE: It is your responsibility, as the instructor, to submit a completed roster to DPSST within 30 days of instructing a certified course.**