



# CMM Supplemental Application



## Fire Training

### A. Fire Training Specialist

- |  | Completed                | Documented*              |
|--|--------------------------|--------------------------|
| <b>ONE</b> { 1. Training Officer Diploma - OFC           | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. NFPA Instructor Level 1 & 2                           | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Equivalency requested (determined by OAFTO Committee) | <input type="checkbox"/> | <input type="checkbox"/> |

**And**

- |  |                          |                          |
|--|--------------------------|--------------------------|
| <b>BOTH</b> { 4. 1 x Training Officer Seminar (4 days @ OFC) <u>or</u> professionally related workshops/conferences (total of 24 hours, ie <b>OAFTO</b> , OAFIC, NFPA . . .) | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. <b>Employment Experience</b> 5 years, full-time, <u>or</u> 7 years, volunteer, <u>Training Officer</u>  |                          |                          |

Title: \_\_\_\_\_ Employer: \_\_\_\_\_ Start (MM/YY): \_\_\_\_\_ to \_\_\_\_\_

Title: \_\_\_\_\_ Employer: \_\_\_\_\_ Start (MM/YY): \_\_\_\_\_ to \_\_\_\_\_ \*\*

\* Documented: include copies of certificates/diplomas, agendas/transcripts where possible with CMM Application \*\* Provide detail if additional positions

### B. Fire Training Professional

- |   | Completed                | Documented*              |
|---|--------------------------|--------------------------|
| <b>ONE</b> { 1. Training Officer Certification (Ontario Fire Marshal) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. NFPA Instructor Level 1,2 & 3                                      | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Equivalency requested (determined by OAFTO Committee)              | <input type="checkbox"/> | <input type="checkbox"/> |

**And**

- |  |                          |                          |
|--|--------------------------|--------------------------|
| <b>ALL</b> { 4. 4 x Community College/University Courses (with at least <u>one</u> in Local Gov't., Public Admin, Management, <u>and</u> one job related elective) | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. 2 x Training Officer Seminars (OFM) or professionally related conferences or workshops (total 48 hours ie. <b>OAFTO</b> , OAFIC, NFPA)                          | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. <b>Employment Experience</b> 3 years suppression <u>and</u> 7 yrs, full-time, <u>or</u> 9 yrs, volunteer, <u>Training Officer</u>                               |                          |                          |

Title: \_\_\_\_\_ Employer: \_\_\_\_\_ Start (MM/YY): \_\_\_\_\_ to \_\_\_\_\_

Title: \_\_\_\_\_ Employer: \_\_\_\_\_ Start (MM/YY): \_\_\_\_\_ to \_\_\_\_\_ \*\*

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**New Applicants must attach their CMM Application  
Complete all sections for accurate evaluation**



**C.** 1. Applicant: \_\_\_\_\_ Employer: \_\_\_\_\_

2. Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

3. **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

4. **OAFTO Member**  Yes  No **\*\*OAFTO Membership Required to Apply\*\***

5. **Witness\*:** a) Municipal Fire Official (**OAFTO** Member): \_\_\_\_\_

b) Signature: \_\_\_\_\_ Title: \_\_\_\_\_

\* Witness identity only – not verification of content

**Fee: \$235 (includes CMM & OAFTO Enhancement) HST Exempt.**

Cheque payable to OMMI or VISA \_\_\_\_\_ Exp \_\_\_ / \_\_\_ Name on Card: \_\_\_\_\_  Corp  Personal

Office Use