



CMM Supplemental Application

Fire Service



A. Fire Service Professional (CMM II required)

Completed

Documented*

1. ONE {
- a) Company/Prevention/Training Officer Diploma (OFC)
 - b) NFPA Fire Officer Levels 1 & 2
 - c) Community College Fire Service Diploma
 - d) 8 x credit courses or equivalent in the Fire Service Executive Management Certificate Program (**O AFC**)

2. 80 hours of **O AFC** or professionally related Professional Development in the previous 5 years

3. **Employment Experience:** 5 years Fire Service Officer
Includes Training, Prevention, Suppression,
Mechanical and Communication Officers.

*Note: Training (**O AFTO**), Prevention (**O MFPOA**) & Suppression (**O AFC**) Officers require
their Association Enhancements at the Professional level.

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 Service Executive (CMM III required)

Completed

Documented*

1. ONE {
- a) Diploma in one of these:
i) Public Administration, ii) Business Administration, iii) HR Mgt
 - b) 8 x University/College Courses with at least one in:
i) Local Gov't, ii) Public Admin, iii) Mgt, and one job related elective
 - c) Certificate in Fire Service Executive Management (**O AFC**)
 - d) NFPA 3 & 4

And

2. 160 hours of **O AFC** or professionally related Professional Development in the previous 10 years

3. a) 2 x years on **O AFC** Board/Committee, or Working Group

OR

b) 5 x years of **O AFC** Membership

4. **Employment Experience:** 5 years Chief Officer

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. **O AFC** Member: Yes No ****O AFC Membership Required for Executive Level****

5. Witness: a) Municipal Fire Official (**O AFC** Member): _____

b) Signature: _____ Title: _____

* Witness identity only – not verification of content

Fire Service Enhancement Fee \$282

After application processing, invoices will be sent by email.

Payment may be made by cheque, EFT or online through the link provided on the invoice.

Email to info@ommi.on.ca OR submit by mail to: Suite 267, 6-470 King Street West, Oshawa ON L1J 2K9

Jan 2025

Office
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