



## TLTI EMERGENCY SERVICES TRAINING CENTRE

312 Lyndhurst Road Lyndhurst, ON K0E 1N0

### Application Form

\_\_\_\_\_  
Surname

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Student Email Address

\_\_\_\_\_  
Date(s)

\_\_\_\_\_  
Course Name and Number - required for all Ontario Fire College Programs

### Fire Chief or Designate Information:

\_\_\_\_\_  
Fire Department

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Name of Fire Chief/ Designate

\_\_\_\_\_  
Email Address

### By signing below, you agree to the following:

1. If the prerequisite course was not completed through the Ontario Fire College, or through Grandfathering but rather through in-house training or through another agency or location, a copy of the certificate with IFSAC or ProBoard seal is required to be sent with this application.
2. The student-learner registering for training is physically capable of performing all the duties expected of a firefighter and agrees to abide by the code of conduct
3. The student-learner will abide by TLTI Emergency Services Training Centre policies, such as the Workplace Harassment and Discrimination Policy.
4. For student-learners attending training courses that require breathing apparatus the Fire Chief or designate attests that the applicant has been fit tested within the last year as per the CSA Standard Z94. All student-learners attending courses requiring SCBA are required to bring their own SCBA and 2 cylinders.

\_\_\_\_\_  
*Signature of Fire Chief/ Designate*

\_\_\_\_\_  
Date

**Completed Application Forms can be submitted by email [to: fireadmin@townshipleeds.on.ca](mailto:fireadmin@townshipleeds.on.ca)**