**Fire Service Training**

# Course Authorization Request

*This Course Authorization Request is for: * In-House

Event Number

 Record Keeping Only

 OSU FST Delivered Course

## Course Information

Course Title Name of Instructor Instructor’s Fire Department or Organization Instructor’s Address Instructor’s Telephone Instructor’s Cell Instructors E-mail Address Location of Training County Date of Training Beginning Time Ending Time Date of Training Beginning Time Ending Time Local Contact Telephone Open Enrollment: Yes No

Minimum Enrollment Maximum Enrollment (**REQUIRED**)

 Certification Exam Requested Certification Date Certification Time

Certification Fee $ Address of Exam

Additional Information:

## Signatures Required for Form to be Processed

Instructor’s Signature Host Organization Official’s Signature & Title

*Incomplete forms will be Returned*

# Course Authorization Request

Instructions for Completion of *Course Authorization* Request Form

The following instructions should be followed when completing this form. One form is required for each class or course being requested. **FOR ALL REQUESTS, THIS FORM MUST BE RECEIVED BY OSU FST AT LEAST 30 DAYS PRIOR TO THE CLASS DATE**. Due to the large number of course authorizations received, only those forms that are properly completed will be processed. All other forms will be returned.

Instructions have only been provided for those fields which may not be self-explanatory. A sample of a completed form for in-house training is available at the OSU FST website – [www.osufst.org](http://www.osufst.org/). If you have questions about the form, or require assistance, contact OSU FST at 800.304.5727.

**In-House Training or OSU FST – Delivered Course.** If you are requesting record keeping for a course that will be taught in your organization by you or another instructor from another organization, check “In-House Training”. If you are requesting a course that will be delivered by OSU FST, or if the course is being scheduled by a program coordinator, check “OSU FST Delivered Course”.

**Location of Training.** Enter the street address where the training will be delivered and the name of the local department or organization sponsoring the training.

**Date of Training.** List the date(s) of training and the time the training will be conducted.

**Local Contact. THIS INFORMATION IS CRUCIAL**. The person’s name and telephone number must be listed. If the person has an email address, it should be listed also.

**Open Enrollment**. If you wish OSU FST to market the course state-wide, circle “Yes” on open enrollment. If you wish the course to be limited to personnel from your own organization, or from the local area, circle “No”. *OSU FST will only take registration for the course if “Yes” is circled.*

## Minimum Enrollment and Maximum Enrollment is required.

**Certification Exam Requested.** If a certification process is desired at the end of the course or training check the box. If you check this box, the other certification information must be provided including date of the certification process, the time it will begin, and the street address of the exam and skills testing.

**Additional Information.** Any additional information that is important to the delivery of the course should be listed here. This may include additional materials that are needed, contact information, limitations of the training site, etc.

**Signatures.** For in-house training, the form must be signed by the lead instructor for the course and by an official of the host organization. *In all cases*, the fire chief or their representative must sign the form. Preferably, the fire chief should sign the form, however, the training officer or other senior official *who has the authority to make a commitment for the organization* may sign. The title of the person signing must be listed.

If you need assistance completing this form, contact OSU FST at 800.304.5727. This form is available in PDF format at [www.osufst.org](http://www.osufst.org/) under Quick links Instructors Tab.