Application

for

Accreditation or Reaccreditation

**THE INTERNATIONAL FIRE SERVICE**

**ACCREDITATION CONGRESS**

**CERTIFICATE ASSEMBLY**

**OKLAHOMA STATE UNIVERSITY**

**1723 W TYLER AVE**

**STILLWATER, OK 74078**

See the *Certificate Assembly Accreditation Procedures* in addition to the notes throughout this application for information and documents to be submitted with your entity’s application and self-study package.

APPLICATION TO THE

**INTERNATIONAL FIRE SERVICE**

**ACCREDITATION CONGRESS**

**For Accreditation/Reaccreditation as a**

**Fire Service Professional Qualifications Certifying Entity**

**for**

|  |
| --- |
|  |

(Name of Entity)

**SECTION I**

**TO: International Fire Service Accreditation Congress**

Application is hereby made to gain accreditation through the International Fire Service Accreditation Congress to certify fire service personnel.

It is understood that such accreditation entails the adherence to the criteria as established by the International Fire Service Accreditation Congress Certificate Assembly and this application is submitted to maintain the certification program of the entity in accordance with the aforementioned criteria.

It is further certified that the statements and information contained in this form are, to the best of our knowledge, truthful and accurate and that where statements of intent are given, we undertake to fulfill this intent.

We further certify that the criteria for accreditation through the International Fire Service Accreditation Congress Certificate Assembly has been received and studied. The conditions contained therein are acceptable and do not present any conflict with applicable statute or law.

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| --- | --- | --- | --- | --- | --- | --- |
| **Signed:** |  | | | | | |
| **Name:** |  | | | **Title:** | |  |
|  | (Please Print) | | |
| **Witnessed:** | |  | |  |  | |
|  | | (Signature) | |  | (Print Name) | |
| **Date of Application:** | | |  | | | |

Send completed forms and supporting documentation to (electronic files preferred):

**Callie Mars, Coordinator**

International Fire Service Accreditation Congress

Oklahoma State University

1723 W Tyler Ave

Stillwater, OK 74078Email: [admin@ifsac.org](mailto:admin@ifsac.org)

Phone: (405) 744-8303

**SECTION II - Contact Information**

**Complete each part and provide supplementary documentation as required.**

1. Name or title of entity for which accreditation is sought:

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1. Physical/street address of entity (include city, state, and postal code):

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1. Mailing address where communications in regard to accreditation should be sent (include city, state, and postal code):

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1. Principal officer of entity:

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| --- | --- | --- |
|  |  |  |
| (Name) |  | (Title or Status) | |

1. Senior person responsible for certification programs:

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| --- | --- | --- |
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| (Name) |  | (Title or Status) |

1. Primary contact regarding application package and site visit coordination with IFSAC Administration and site visit team leader:

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| --- | --- | --- | --- | --- |
|  | | |  |  |
| (Name) | | |  | (Title or Status) |
| Phone: |  | Email: | |  |

**SECTION III – Administrative Questions**

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| 1.Is there a legal act, legislation, resolution, or statute authorizing the entity for which accreditation is requested to certify fire service personnel in respect to their competence to perform fire service duties?  **If yes - go to question 3 If no - go to question 2**  *Documentation reference and/or comments:* | YES  NO |
| 2. In the absence of any of those listed in 1 above, can you: |  |
| 1. provide significant evidence of support for your accreditation as a certifying entity within your constituency?   *Documentation reference and/or comments:* | YES  NO |
| **or** | |
| 1. show evidence of the existence of law broad enough in scope as to encompass certifying activities of the organization seeking accreditation.   *Documentation reference and/or comments:* | YES  NO |

**NOTE: For questions 1 and 2 above, supporting documentation such as a copy of your state's legal act, legislation, resolution or statute, or letters from supporting organizations expressing concurrence with this application must accompany this application.**

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| 3. Along with the application, the entity requesting accreditation must also provide the following documentation to IFSAC Administration for review prior to the site visit: | |
| 1. Documentation showing financial support (source(s) of funding) for the continuous operation of the certifying process.   *Documentation reference and/or comments:* | YES  NO |
| 1. Documentation that indicates staffing levels adequate to implement and sustain the certification process described?   *Documentation reference and/or comments:* | YES  NO |
| 4. The entity understands the following materials shall be available for the site visit team to review:   * Test item correlation sheets in the IFSAC format * Performance skill evaluation sheets or other methodologies used * Certification policies and procedures manual * Test banks * Other documents or media as referenced or used in support of the submittal | YES  NO |

**SECTION IV - Levels to be accredited**

We request accreditation to the following certification levels:

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| **ENTITY LEVELS** |  | **NFPA STANDARD AND EDITION)** |
| *Example: Fire Fighter I* |  | ***NFPA 1001 2013 Edition*** |
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**(Insert table rows or use extra sheet to continue list, if needed)**

**NOTE: Completed IFSAC correlation sheets for each of the levels listed must accompany this application. IFSAC correlation sheets can be downloaded from the IFSAC website ifsac.org by logging into the member portal.**

**Standards and entity developed correlation sheets must accompany this application for any levels applied for that are not in the NFPA 1000 professional qualifications series of standards, NFPA 472, or NFPA 473.**