Fall 2025 Fire Academy Track Program Preliminary Application

Date:

Name: \_

Last Name First Name Middle Name

Address:

Street Address (Not P.O. Box) Apartment No.

City County State Zip Code

Telephone:

Home Cellphone

IRSC Student ID #

Date of Birth (Month-Day-Year)

Email

Have you ever been arrested? If yes, you must provide the final dispensation of the case and a written explanation about the charges as an attachment to this form. Falsification of information on this application will result in disqualification for acceptance in the Fire Academy Track Program.

Attached are the items that will preclude you from admission and or obtaining certification for the following areas

1. Fire Academy Track program at Indian River State College
   1. Florida Statutes Chapter 633
2. Basic Fire Academy
   1. Florida Statutes Chapter 633
   2. Basic Fire Academy Background
   3. Basic Fire Academy Medical Examination Requirements
3. Emergency Medical Technician program at Indian River State College
   1. Florida Statutes Chapter 633
   2. Florida Statutes Chapter 456
   3. Health Science Division Background Check Requirements
   4. Health Science Division Physical Examination Requirements

Attach a photocopy of your driver’s license below.

You acknowledge that you have reviewed and understand the above areas that would preclude you from admission and or obtaining certification for the above-mentioned programs. You will be registered by our staff for your Fire Academy Track and any required general education classes except for EMT. You also acknowledge by submitting this application you are accepting financial responsibility for the classes you will be enrolled in throughout this program.

Signature

*Return to: Indian River State College Fire Science Department*

*Mr. Aaron Goodale, MPA, CFO Fire Science Chair/Master Instructor 3209 Virginia Avenue*

*Ft. Pierce, FL 34981-5596*

[*fireacademytrack@irsc.edu*](mailto:fireacademytrack@irsc.edu)

*(772) 462-7954*