



INDIAN RIVER STATE COLLEGE

Spring Fire Academy Track Program Preliminary Application

Date: _____

Student ID Number: _____

Student Rivermail: _____

Name: _____
Last Name First Name Middle Name

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

_____ City County State Zip Code

Telephone: _____
Home Cellphone

Date of Birth (Mo/Day/Yr): _____

Have you ever been arrested? _____ Yes _____ No

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

- A. Fire Academy Track program at Indian River State College
 - a. Florida Statutes Chapter 633
- B. Basic Fire Academy
 - a. Florida Statutes Chapter 633
 - b. Basic Fire Academy Background
 - c. Basic Fire Academy Medical Examination Requirements
- C. Emergency Medical Technician program at Indian River State College
 - a. Florida Statutes Chapter 633
 - b. Florida Statutes Chapter 456
 - c. Health Science Division Background Check Requirements
 - d. Health Science Division Physical Examination Requirements



INDIAN RIVER STATE COLLEGE

Attach a photocopy of your driver license below.

You acknowledge that you have received and understand the above areas that would preclude you from admission and or obtaining certification from the above-mentioned programs.

Signature: _____

Return to Indian River State College
Fire Science Department
Dr. Alfred H. Williams V
Fire Science Chair, Associate Professor
3209 Virginia Avenue
Ft. Pierce, FL 34981-5596
772-462-7954