



FIRE FIGHTER 1 & 2 ACADEMY TASK COMPLETION CHECKLIST



Please Print

NAME: (Last, First, MI)	
Yuba College Student ID (*):	
EMAIL:	
PHONE NUMBER:	
ARE YOU A CA RESIDENT?	<i>If you do not qualify as a California Resident, you will be a non-resident for registration fees. Call for more details if necessary.</i>

(\*) – “Apply Now” Link if you do not currently have a YC Student ID: <https://yc.yccd.edu/admissions/apply/>

Dear Applicant:

Thank you for your interest in the Yuba College Firefighter 1 Academy. Please review the website should you have any questions about the application process. Use this as a guide to ensure you submit a **COMPLETE** application and sort your materials in order as listed below. Incomplete packets will not be accepted.

1. Use this form, **Firefighter 1 Task Completion Checklist** as your coversheet to submit your application.
2. Complete the **Firefighter 1 Academy Application**. This form can be completed on-line or by hand. Please keep in mind that it needs to be clear and legible. If we cannot read it, it will not count. Please sign and date the document.
3. Attach a **copy of any relevant current certificates** (PSFA, AHA BLS card, EMT, etc.)
4. Complete and submit the **Autobiography**. (Use additional paper)
5. **Yuba College Public Safety Emergency Information & Notification**
6. **Statement of Applicant**
7. **Once accepted into the academy, you will be required to provide medical clearance (This documentation will be provided with the acceptance letter)**

Please return this completed application packet via e-mail to [dcoats@yccd.edu](mailto:dcoats@yccd.edu), or drop it off in-person, or by mail to the Fire Technology Program Office in Room 2101, at Yuba College, Marysville Campus, 2088 North Beale Road, East Lot, Building 2100, Marysville CA 95901. Applications will be accepted on a first come, first served basis.

For Office Use Only:	Date:	Time:
	Rec'd By:	Delivery Method:

## YUBA COLLEGE FIRE TECHNOLOGY FF1&2 ACADEMY APPLICATION

NAME: Last, First, Middle Initial	
Yuba College Student ID No.	
Address	
City, State, Zip	
Cell Phone:	
Email:	

**Education:**

Total Completed College Units	Cumulative GPA	Degree Completed
Date Completed	Major	School

**Fire Experience** *(if not applicable, list N/A – Do Not Leave Blank):*

Department	Rank:		
Department	Rank:		
Will you be sponsored by a Fire Department?	What Department?		
<table style="width: 100%; border: none;"> <tr> <td style="width: 20%; text-align: center;">YES</td> <td style="width: 20%; text-align: center;">NO</td> </tr> </table>	YES	NO	
YES	NO		
Were you in R.O.P.?	Department & Years		
<table style="width: 100%; border: none;"> <tr> <td style="width: 20%; text-align: center;">YES</td> <td style="width: 20%; text-align: center;">NO</td> </tr> </table>	YES	NO	Fire Training experience, please describe:
YES	NO		

Have you ever applied to or attended a Fire Academy?			
YES	No	When?	
If Yes, Reason for Non-Completion:			

**Certificates** *(Please attach copies & list).*

EMT Certified	Exp Date	AHA CPR	Exp Date

**Health & History**

All students accepted to the academy will need a **Medical Clearance** prior to completing the final enrollment process. Understanding the physical demands and rigorous activities with this academy, do you have any medical conditions, an existing injury, or are you taking any medications for a chronic health problem that will affect total participation in the Academy? If YES, please provide a brief explanation:

I understand that the falsification of this application or any submitted materials can result in disqualification to attend this Academy; I further understand that this application will not be kept on file or returned if I am not accepted to attend *(please keep copies of all documents you submit).*

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**YUBA COLLEGE  
PUBLIC SAFETY CENTER  
EMERGENCY INFORMATION AND NOTIFICATION**

Firefighter I & 2     Cal Fire BWF

**Part 1 - Student Information:**

Name: \_\_\_\_\_  
Last, First, Middle Initial

Address: \_\_\_\_\_  
Number, Street, Apt#, City, State, Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Blood Type (if known): \_\_\_\_\_ Allergies:  None  Yes  
(IMPORTANT: List & provide instructions in the event of an emergency-if applicable)

**Part 2- Physician Information:**

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

I currently do not have a private physician and prefer to be seen at

Name and Address: \_\_\_\_\_

**Part 3- Insurance**

**Do you have medical/health care coverage available to you through your employer/  
spouse /parents? If yes, please provide a copy.**

Yes  No If yes: Insurance Company: \_\_\_\_\_ Policy # \_\_\_\_\_

**Part -3 In Case of Emergency Notify**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell or Other Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell or Other Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Affiliated:  Yes  No Agency: \_\_\_\_\_

Training Manager: \_\_\_\_\_ Phone: \_\_\_\_\_

Cadet Signature: \_\_\_\_\_ Date: \_\_\_\_\_



YUBA COLLEGE FIRE TECHNOLOGY  
**FIRE FIGHTER 1 & 2 STATEMENT OF APPLICANT**



It is my intention to enroll in the Yuba College Firefighter 1&2 Academy (FIRTC 61) I have read and understand the following:

- I must attend the Mandatory Orientation meeting via Zoom on:
  - **TBA.**  
And a Mandatory Orientation **in-person meeting** at Yuba College on
  - **Thursday, July 10, 2025, from 0900-1200**  
More information will be provided in your acceptance packet.
  - Mandatory Work Detail: **August 4 & 5, from 8am to 5pm**
- I must complete all college requirements for registration including counseling and payment of fees. I may not be eligible to participate if I am on academic or progress probation, pending review and determination by Yuba College.
- To receive the Firefighter 1 & 2 Academy Course Completion Certificates, I must successfully complete FIRTC 61
- I understand that I must provide proof of a physical exam, purchase of PPE and uniforms, and rental of equipment by **Monday, July 7, 2025.**
- I understand that the Academy will be a physically and academically challenging course. It will be a time-consuming commitment and will place extraordinary demands on my time and resources.
- The academic standard is rigorous, requiring 80% or greater on all quizzes and examinations. You can be dropped due to academic or skill requirements.
- The manipulative test standard will be task completion on all skills and evolutions, according to the standards established by the State Fire Marshal's Office and Yuba College Fire Academy.
- My attendance is required at all sessions, unless excused by the Fire Academy Facilitator or FAS. I understand that some classes are mandatory, and if I miss any of them, there is no make-up. This would prevent me from successfully completing the Academy.
- Punctuality, attitude, and participation are components of the course grade. Problems in any of these areas could result in my being administratively dropped from enrollment.
- I understand that I will be responsible for certifications and exam fees when required.

PRINTNAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## AUTOBIOGRAPHY

---

**Write your autobiography. Must be 2 – 3 pages in length, typed with double space**

**Due with application.**

**Please include the following;**

Who you are, include family life, employment, student, etc.

What type of person you are.

Where you were born.

What it was like growing up.

What is your greatest achievement thus far?

What is the worst thing that has ever happened to you? How did you overcome it?

What do you believe is your best strength that will help you as a firefighter?

What is your biggest weakness that could cause you difficulty as a firefighter?

Explain to us what you have had to do to prepare yourself for this academy?

What do you expect from this academy?

Why is this academy important to you?

What are your future goals?

Don't start out on the wrong foot: get the paper completed. I want to know who you are!