

**MONMOUTH COUNTY FIRE ACADEMY**  
**1027 HIGHWAY 33 EAST**  
**FREEHOLD , NJ 07728**

Telephone # 732-683-8857

Fax # 732-683-8978

Timothy Smith  
Fire Marshal

William Itinger  
Chief Training Officer  
witinge@co.monmouth.nj.us

**FIREFIGHTER II APPLICATION**

This course complies with NJAC 5:73-4.3 (a) and NJAC 5:73-4.3 (b). To enroll in this program the student must possess and supply a copy of Firefighter I certification issued by the NJ Office of Training & Certification as per NJAC 5:73-4.3. The student must have completed a Firefighter I course and applied to the Division of Fire Safety to receive a state certification. The county certificate cannot be used to enroll in this program. Any applicant who does not understand this or has a question, please call the academy.

The course is 96 hours

PLEASE PRINT - ( INFORMATION MUST BE FILLED IN)

Student Name \_\_\_\_\_

State ID # \_\_\_\_\_ SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Street \_\_\_\_\_

Town \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Company/Department \_\_\_\_\_ Station # \_\_\_\_\_

Department Address/Street \_\_\_\_\_

Town \_\_\_\_\_ Zip Code \_\_\_\_\_

Department Authorization Required (please print)

Authorized by \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Phone # \_\_\_\_\_

Date \_\_\_\_\_

12-01-2006 whi