



Interdisciplinary Trainer Application

CFA4043 (Rev 8/13)

Application for		Discipline	
Working Group/Subject/Specific Courses Wishing to Instruct			

APPLICANT INFORMATION

Name		Unit	
Rank/Present Assignment		Email	
Work Address		Business Phone	
City		State	Zip
Length of Service in Grade		Length of CAL FIRE Service	

EDUCATION Attach Position Applicable Training, Education, and Qualification Certificates

Highest Degree		College/University		Major	
EMS Certificate or License #				Expiration Date	
Certificates					
Additional Education and Prerequisites					

Check All Completed Instructor Courses

SFT Instructor Courses	1A <input type="checkbox"/>	1B <input type="checkbox"/>	1C <input type="checkbox"/>	2A <input type="checkbox"/>	2B <input type="checkbox"/>	2C <input type="checkbox"/>	
ICS and NIMS Training	I-100 <input type="checkbox"/>	I-200 <input type="checkbox"/>	I-300 <input type="checkbox"/>	I-400 <input type="checkbox"/>	IS-700 <input type="checkbox"/>	IS-701 <input type="checkbox"/>	IS-800 <input type="checkbox"/>
CA Teaching Credential	<input type="checkbox"/>	Type of Credential					
UC-60-Hour Instructor Course	<input type="checkbox"/>	M-410 Facilitative Instructor (NWCG)		<input type="checkbox"/>			

EXPERIENCE

Courses Taught (CAL FIRE/SFT/NWCG, etc.) or Committees/Working Groups Participated on	Course Length or Dates of Membership	Times Taught	Where
Curriculum Development Experience			
Specialized Experience/Training Relative to Teaching/Instructing			
Qualified/Certified to Instruct in What Subject Areas and Certifying Authority			

Comments

Applicant		Date	
Supervisor		Date	
Unit Training Officer		Date	
Unit Chief		Date	
Region Training Chief		Date	
Lead Instructor/Chair Person		Date	
Course/Program Coordinator		Date	

ADMINISTRATIVE USE ONLY

Signature of Final Approver		Date	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Comments			
Applicant Notified by		Date	