



FDSOA Certification Office
5967 Bedford Pl., Ann Arbor, MI 48105
Voice: 248-880-1864 • Fax: 248-479-0491
Email: programs@fdsoa.org

Health & Safety Officer Certification Application

Applicants shall meet the job performance requirements (JPRs) of NFPA 1521-2015 Standard for Fire Department Safety Officer, defined in Chapter 4 Section 4.1.1.

Please Type or Print All Information

Name: _____ Last 4 Digits of SS#: _____

Agency: _____ Rank: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Cell Phone: _____

Do you have any special needs or additional learning support requirements? Yes No

Professional Experience (Required)

Agency	Dates of Employment	Position

Applicants Signature: _____ Date: _____

Chief Officer Statement and Signature (Required)

By signing below, I verify that the above applicant has been involved in the Emergency Services for a minimum of 5 years and meets the requirements set forth NFPA 1021 – 2014, Standard for Fire Officer Chapter 4, Section 4.1.

Chief Officer Name: _____

Chief Officer Signature: _____ Date: _____

Please scan and email the completed application to programs@fdsoa.org. You will then be directed by email of the next step and how to purchase your exam.