



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

**Incident Safety Officer Certification Application**

Applicant shall meet the requirements of NFPA 1021 Standard for Fire Officer Chapter 4 Section 4.1 and the job performance requirements (JPRs) defined in NFPA 1521-2015 Standard for Fire Department Safety Officer Chapter 5 Section 5.1.1.

**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](mailto:programs@fdsoa.org). You will then be directed by email of the next step and how to purchase your exam.