



Training & Certification Bureau
Verification of Successful Completion of Phase I – FFI Practical Skills Testing

To be completed by an Evaluator present for the Phase I, Practical Skills Testing:

Candidate: _____ Date: _____

Location(s): _____

- NFPA 1001-2013, 5.3.7: Fire Control-passenger car fire
NSFM Evolution # 1
- NFPA 1001-2013, 5.3.8: Fire Control-exterior combustibles
NSFM Evolution #2
 - Piles/stacks of class A combustible materials
 - Storage Containers (exterior dumpster/trash bin)
- NFPA 1001-2013, 5.3.10: Fire Control-interior structure fire
NSFM Evolution #3
- NFPA 1001-2013, 5.3.19: Fire Control-ground cover fire
NSFM Evolution # 4
- NFPA 1001-2013, 5.3.12: Vertical Ventilation
NSFM Evolution # 5

I verify that I was present and personally evaluated this candidate in the following practical skills:

Evaluator: _____

Signature: _____ Date: _____

Please Return Form to:

Training & Certification Bureau
107 Jacobsen Way
Carson City, NV 89701
or
E-Mail: sfm@dps.state.nv.us
Fax to: (775) 684-7507

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