

State of Vermont Vermont Fire Academy FIREFIGHTER I and II CHALLENGE EXAMINATION APPLICATION

A challenge certification exam may be attempted by a candidate once every five years per certification level.

Firefighter I Challenge Exam

Individuals who have not completed an approved Vermont Fire Academy sanctioned Firefighter I program, but who feel they have obtained the necessary training by some other means may challenge the Firefighter I Exam. To be eligible to take the Firefighter I Challenge Exam, the candidate must be at least 18 years of age at the test date and submit proof of the following training with their challenge exam application:

- Current Adult and Child CPR with AED Certification
- Current First Aid with Environmental Emergencies Certifications
- Hazardous Materials Operations that qualifies as current with NFPA 470, 472, or 1072.
- National Traffic Incident Management Course
- Wildland Firefighter (9 hours)
- ICS100: Introduction to Incident Command System

Challenge Exam Part 1: Written Exam

The written exam consists of 100 multiple-choice questions based on the knowledge requirements outlined in the current edition of NFPA 1001, Standard for Firefighter Professional Qualifications. Candidates must achieve a minimum passing score of 70. Candidates are permitted two attempts at passing the written exam. A second attempt may take place after 14 days but before 60 days of the first attempt and will be conducted at the Vermont Fire Academy in Pittsford.

Challenge Exam Part 2: Practical Skills Exam

The practical skills exam consists of 10 practical skill stations based on the requisite skills outlined in the current edition of NFPA 1001, Standard for Firefighter Professional Qualifications. Candidates must demonstrate satisfactory skill performance in each of these skill stations. Two attempts per skill station are permitted at the initial skills exam. Candidates are permitted one retest opportunity consisting of two additional attempts for stations that are failed plus an additional randomly selected skill station. The retest opportunity must take place after 14 days but before 60 days of the first attempt and will be conducted at the Vermont Fire Academy in Pittsford. If the candidate fails to pass either the previously failed skill station or the additional random skill station, then the challenge process ends.

Firefighter I Certification is granted once a candidate passes both the written and practical skills exams.

Firefighter II Challenge Exam

Individuals who have not completed an approved Vermont Fire Academy sanctioned Firefighter II program, but who feel they have obtained the necessary training by some other means may challenge the Firefighter II Exam. To be eligible to take the Firefighter II Challenge Exam, the candidate must be at least 18 years of age at the test date and submit proof of the following training with their challenge exam application:

- Proof of valid Vermont Firefighter I Certification or certification that is recognized as equivalent to Vermont standards.
- Current Adult and Child CPR with AED Certification
- ICS200: ICS for Single Resources and Initial Action Incidents

Challenge Exam Part 1: Written Exam

The written exam consists of 100 multiple-choice questions based on the knowledge requirements outlined in the current edition of NFPA 1001, Standard for Firefighter Professional Qualifications. Candidates must achieve a minimum passing score of 70. Candidates are permitted two attempts at passing the written exam. A second attempt may take place after 14 days but before 60 days of the first attempt and will be conducted at the Vermont Fire Academy in Pittsford.

Challenge Exam Part 2: Practical Skills Exam

The practical skills exam consists of 10 practical skill stations based on the requisite skills outlined in the current edition of NFPA 1001, Standard for Firefighter Professional Qualifications. Candidates must demonstrate satisfactory skill performance in each of these skill stations. Two attempts per skill station are permitted at the initial skills exam. Candidates are permitted one retest opportunity consisting of two additional attempts for stations that are failed plus an additional randomly selected skill station. The retest opportunity must take place after 14 days but before 60 days of the first attempt and will be conducted at the Vermont Fire Academy in Pittsford. If the candidate fails to pass either the previously failed skill station or the additional random skill station, then the challenge process ends.

Firefighter II Certification is granted once a candidate passes both the written and practical skills exams.



State of Vermont Vermont Fire Academy FIREFIGHTER I and II CHALLENGE EXAMINATION APPLICATION

Please PRINT all information legibly as it will appear on your permanent records. This entire application must be completed by **both** the challenger & current fire chief prior to submission. Applications can be emailed to: DPS.VFAApplications@vermont.gov

Personal Information						
First Name:	Middle Initial:		Last	Last Name:		
Mailing Address:						
City: State:				Zip Code:		
Home Phone:	Work Ph		Phone:		Other Phone:	
E-Mail:						
Date of Birth:	Minimui	Minimum age is 18.		☐ Male ☐ Female ☐ Non-Binary		
Last Four of Social Security Nur	nber: _					
Agency Information						
Department/Agency Name:						
Rank/Position:			☐ Permanent ☐ Call ☐ Volunteer			
Agency Mailing Address:						
City:		State:		2	Zip Code:	
Agency Phone:			Approximate Date of Hire:			
Examination Requested: Fire Fighter I Fire Fighter II						
The following documents must be submitted for all Fire Fighter I Challenges: Valid Adult & Child CPR/AED/1st Aid Card Hazardous Materials Operations Certificate National Traffic Incident Management Certificate Wildland Firefighter (9 hours) Certificate ICS 100 Certificate			The following documents must be submitted for all Fire Fighter II Challenges: Valid Adult & Child CPR/AED Card Fire Fighter I Certificate ICS 200 Certificate			
Exam Date Requested:			Exam Location:			
By my signature below, I certify that the above information is true and correct to the best of my knowledge and that I will be at least 18 years of age on the date of the challenge examination. I understand that intentionally making a false statement on this application is a crime. The holder of any certification obtained in such a manner, through fraud or misrepresentation of material fact, will be subject to decertification per Section 6 of the VERMONT FIRE SERVICE TRAINING COUNCIL RULES AND POLICIES, Effective March 15, 2024.						
Applicant Signature: Date:						Date:
Chief Signature:		Chief Na	me Printed:		Date:	

Submit completed application and required documentation to:

Vermont Fire Academy 93 Davison Drive, Pittsford, VT 05763

This page must be completed for Firefighter I Challenge Candidates.

State of Vermont Department of Public Safety – Division of Fire Safety Vermont Fire Academy

FIREFIGHTER I CERTIFICATION LIVE FIRE SUPPRESSION VERIFICATION FORM

National Fire Protection Association, Standard 1001, 2019 Edition

This is to attest that:							
Name of Candidate:			Last Four of Social Security Number:				
Name of Department:							
Has successfully completed the following Live Fire suppression Evolution (either in actual suppression activities or during formal training conducted in accordance with the applicable portions of NFPA Standard 1403, Standard on Live Fire Training Evolutions, 2018 edition). Completion of the evolution shall have addressed all requirements of the NFPA 1001 Standard Chapter 5, Firefighter I, 2019 Edition.							
Requirement Completed	J	Date Completed					
4.3.10	Interior Structural Fire Attack						
4.3.7	Passenger Vehicle Fire Attack						
4.3.8	Exterior Class A Fire Attack						
4.3.9	Search & Rescue						
4.3.16	Portable Fire Extinguisher Suppression						
4.3.19	Ground Cover Fire Attack						
By my signature above, I certify that the above information is true and correct to the best of my knowledge. I understand that intentionally making a false statement on this application is a crime. The holder of any certification obtained in such a manner, through fraud or misrepresentation of material fact, will be subject to decertification per Section 6 of the VERMONT FIRE SERVICE TRAINING COUNCIL RULES AND POLICIES, Effective March 15, 2024. This form is NOT valid without the signature of the Chief of the Department below: Chief of Department							
Print Chief's Name: Chief's Sig			9:	Date:			
Department Name:							
Address:							
City/Town:			State:	Zip Code:			

This page must be completed for Firefighter II Challenge Candidates.

State of Vermont Department of Public Safety – Division of Fire Safety Vermont Fire Academy

FIREFIGHTER II CERTIFICATION LIVE FIRE SUPPRESSION VERIFICATION FORM

National Fire Protection Association, Standard 1001, 2019 Edition

This is to attest that:							
Name of Candidate:			Last Four of Social Security Number:				
Name of Department:							
Has successfully completed the following Live Fire suppression Evolution (either in actual suppression activities or during formal training conducted in accordance with the applicable portions of NFPA Standard 1403, Standard on Live Fire Training Evolutions, 2018 edition). Completion of the evolution shall have addressed all requirements of the NFPA 1001 Standard Chapter 6, Firefighter I, 2019 Edition.							
Requirement Completed	,	Date Completed					
5.3.2	Coordination of an Interior Fire Attack						
And has completed one or more of the following live fire suppression evolutions:							
5.3.1	Ignitable Liquid Fire Extinguishment with Foam						
5.3.3	Flammable Gas Cylinder Fire Control						
By my signature above, I certify that the above information is true and correct to the best of my knowledge. I understand that intentionally making a false statement on this application is a crime. The holder of any certification obtained in such a manner, through fraud or misrepresentation of material fact, will be subject to decertification per Section 6 of the VERMONT FIRE SERVICE TRAINING COUNCIL RULES AND POLICIES, Effective March 15, 2024. This form is NOT valid without the signature of the Chief of the Department below:							
Chief of Department							
Print Chief's Name:		Chief's Signatur	e:	Date:			
Department Name:							
Address:							
City/Town:			State:	Zip Code:			