



Division of Fire Safety
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FFI & FFII Course / Module Make-up Form (Please Print)

Student's Name: _____
(Completed by Lead)

Normal Program location: _____
(Completed by Lead)

Make-Up Location: _____
Example- Starksboro FFI (Completed by Lead)

Make-Up Lead Name: _____
(Completed by Lead)

Make-Up Class / Module: _____
Example- Wildland Unit 2 (Completed by Lead)

Make-Up Information: _____
Exam Score Practical Hours (Completed by Make-Up Lead)

(Make-Up Lead Signature) (Date)
The Lead fills in the appropriate information, provides the form for the student to take with them,
the Make-Up Lead completes the form and the student returns the completed form to the Lead.

**This form must be returned to the Lead of the program YOU
were originally signed up for!**