

Eligible Organization Application Form



1. Contact Information:

Organization Name: _____

Mailing Address: _____

City/State/Zip: _____

County: _____

Phone: _____

Fax: _____

E-Mail: _____

Website: _____

Physical Address: _____

City/State/Zip: _____

Authorized Signator: _____
(Print Name)

For Office Use Only

Date
Received

Date
Approved

Approved
By

E

2. Type of Organization:

- Fire Department/District
- Fire Brigade
- Governmental Entity
- Higher Education
- Vocational School

3. Declaration:

I _____ (Authorized Signatory) hereby acknowledge that the _____ (Organization Name) will submit to the Division of Fire Safety all required forms and documentation as required. In addition, the organization will maintain a record keeping system for all courses and attendees. The organization will also comply with all regulations regarding Eligible Organizations contained in N.J.A.C. 5:73C, et. seq.

(Authorized Signatory)

(Date)

This form must be completed and an Eligible Organization ID number assigned by the Division of Fire Safety before any other approvals will be issued by the Office of Training and Certification. Be sure that your Eligible Organization number appears on all applications forwarded to the Office of Training and Certification.

Only the Authorized Signatory appointed by the authority having jurisdiction may sign the above statement. A copy of the resolution that appoints the Authorized Signatory must be included with this application. If the Authorized Signatory changes, the organization must notify the Office of Training and Certification within 30 days.

Eligible Organization Application Form Instructions

Note: Please type or print clearly on the application form.

Section

1. Enter the organization name, mailing and physical addresses, county name, contact information, and authorized signator name.
2. Identify the type of organization. Please select only **one** choice. If you choose Fire Department you must identify the fire department identification number (FDID) issued by the Division of Fire Safety. If you choose Fire District you must provide documentation from the New Jersey Department of Community Affairs which recognizes the Fire District. If you choose Fire Brigade you must enclose documentation from OSHA which officially recognizes the Fire Brigade and its operational plan. If you choose governmental entity provide documentation that the office has been organized and operates within a municipal government to conduct fire service training. If you choose higher education or vocational-technical school you must supply State documentation which identifies the organization and its educational endorsement.
3. The authorized signator must sign and date the form.

Mailing Instructions:

Please forward the completed application package and official adopted resolution to:

**Attn: EO Application
Division of Fire Safety
Office of Training and Certification
P.O. Box 809
Trenton, NJ 08625-0809**

Questions regarding Eligible Organizations, the application process or requirements may be made to our office staff at **(609) 777-3552**. Please choose option two to be connect into the Training Unit. Please forward the originals of the application form and adopted resolution to our mailing address. You may fax the application package to us if you need a 24 hour turn-around to obtain an eligible organization number.

Dear Fire Training Organization:

The New Jersey Division of Fire Safety is accepting applications from municipal Fire Departments, Fire Districts, OSHA approved Fire Brigades, and higher education institutions accredited by the State of New Jersey, desiring to obtain Eligible Organization status recognized by the Division of Fire Safety. The issuance of an Eligible Organization Number will permit the organization to conduct fire service “certified” training to be delivered at the local level, which will be recognized and sanctioned by the Division of Fire Safety.

Please complete the required application forms if your organization is interested in applying for Eligible Organization status with plans for offering fire service certified training, such as: Firefighter 1 or 2, Fire Service Instructor 1 or 2, Drill Ground Instructor, Fire Officer 1 through 4, Fire Inspector, Fire Official, Incident Management 1 through 3, Hazardous Material: Awareness/Operational/Incident Commander, National Fire Academy courses, or other educational programs approved by the Division of Fire Safety. Your organization must complete a “Facility Form” if you intend to conduct training at your permanent training facilities, or if you plan to use a temporary training facility for the delivery of the training programs.

If your agency is submitting to become an Eligible Organization you will need to provide a “Resolution” from your governing body (e.g., county or municipal government, fire district, or higher education administrative board). You may use the enclosed sample resolution as a guide to create the resolution. The resolution must be endorsed by the administrative authority, and must indicate a role-call vote and display the authorities official seal on the document.

In order to deliver sanctioned courses a “Course Delivery Form” must be forwarded to the Office of Training and Certification at least two weeks in advance of the course delivery date(s). Please complete the appropriate application forms and return them to: **Attn: EO Application, Division of Fire Safety, Office of Training and Certification, P.O. Box 809, Trenton, NJ 08615-0809**. If you have any questions, contact the Office of Training and Certification staff at **(609) 777-3552**.

Sincerely,

Gregory S. Kirkham, Supervisor
Office of Training and Certification
Division of Fire Safety

Enclosure: EO, Facility, Course Delivery Application
Sample Resolution

Sample Resolution

Every entity which intends to participate in the State's Firefighter Certification Program or desires to obtain program sanctioning from the Division of Fire Safety for training designated to the New Jersey Fire Service, must designate a person to be responsible for the signing of official documents and to act as a liaison. This must be done by formal action via a resolution of the governing body of the municipality or fire district. It should name the person or job title (e.g., fire department training officer) that is being appointed. Many agencies choose to name the position rather than the person, so that when the person is promoted or reassigned a new resolution does not need to be created.

A sample resolution follows for your information on content. This sample resolution does not contain the necessary legal requirements of a resolution, etc.

RESOLUTION

Whereas, the state has created a voluntary program to certify firefighters, and

Whereas, the [municipal governing body name or fire district name] has reviewed, discussed and voted to participate in the program, and

Now Therefore,

Be it Resolved, that the [municipal governing body name or fire district name] appoints [person's name or job title] as the Authorized Signatory to sign any documents necessary to implement the Firefighter Certification Program in [municipality or fire district name].