

Dear Prospective Wildland Fire Fighter Academy Student:

Thank you for your interest in Mendocino College's Wildland Fire Fighter Academy. The program will begin March 2, 2018.

A mandatory orientation for fitting and measuring equipment will be held February 22nd, 2018, at the Cal Fire Station in Weott, 370 Newton Rd. Hours are to be announced.

This course will offer basic, entry-level wildland firefighting training for individuals who are seeking a career with state, federal and local fire departments. Upon successful completion of the course students will receive a Cal Fire Basic Firefighter Certificate.

The course information is as follows. Check WebAdvisor for details.

Location	Course	Section	Credits	Days	Hours
Cal Fire Weott	FSC 68	1680	7.5	Friday	1300-1750
				Saturday	0700-1650
				Sunday	0800-1650

In order to enroll in this program you must do the following:

- Apply online at www.mendocino.edu or complete the Application for Admission (if you are a continuing student of Mendocino College and have been enrolled in one if the last 2 semesters, this is not necessary).
- Complete the Spring 2018 Prerequisite Form (attached)
- Return completed form to:
Mendocino College, Office of Admissions and Records
1000 Hensley Creek Road, Ukiah CA, 95482
707-468-3430 (fax)

After your prerequisite form has been received and processed by Admission and Records, you will be advised when you can enroll. You may enroll by using the following methods:

- Walk-in registration (North County Center, Coast Center, Ukiah Campus, Lake Center)
- WebAdvisor - <https://webadvisor.mendocino.edu/>

Please visit our web page at www.mendocino.edu for additional information or contact Theresa Gowan at 707-467-1048 or tgowan@mendocino.edu. If you have any questions regarding the registration process please email Anastasia Simpson-Logg in Admissions and Records at asimpson@mendocino.edu or call 707-468-3101.

Equipment and Uniform Requirements for FSC 68

Daily Uniform

Ben Davis Navy Blue Pants

Navy Blue Crewneck T-shirt

Navy Blue Sweatshirt (optional)

Rain gear (optional)

Wildland Boot: (student responsibility)

Heavy duty, lace-type work boots with deeply lugged soles and heels (Vibram), and leather tops at least eight inches in height. The toe of the boot should be of hard material, such as hard leather, to reduce the potential of toe injuries. Steel toes are not required but do give added protection.

Examples:

Danner

Super Rain forest

Black Leather

Wildland Tactical Firefighter

Wesco

Jobmaster Logger Work Boots

Vib Sole Whites

LTT NFPA Smokejumper

Structure Gear: (If students owns must meet standards on flyer. Rental is available \$375)

Structure Gear (turnouts, suspenders, boots, gloves, hood and helmet)

SCBA (Fit testing and rental will happen at mandatory orientation \$380)

Wildland gloves: (student responsibility)

Shelby 500ZF Gauntlet Wildland Gloves



TURNOUT RENTAL

(866) 887 6688 | www.TurnoutRental.com | info@TurnoutRental.com

BASIC WILDLAND FIREFIGHTER ACADEMY MENDOCINO COLLEGE / CALFIRE

TURNOUT ENSEMBLE PPE elements include:

- Turnout Coat
- Turnout Pants w/ suspenders
- Fire Helmet w/ goggles
- Fire Boots
- Fire Gloves/gauntlet-style (*retained*)
- Fire Hood (*retained*)
- Equipment/ Utility Gear Bag
- Leather Work Gloves, Safety Glasses, Ear Plugs (*no-charge*)(*retained*)

DURATION RENTAL

- 01.29-03.16.18 (*extension option avail.*)

RENTAL PRICING Reflects the aforementioned PPE elements:

- | | |
|-------------------------|-----------------------|
| • Complete Ensemble | \$315/ ensemble |
| • Security Deposit | N/A (<i>waived</i>) |
| • Shipping & Processing | \$60/ensemble |
| • Grand Total | \$375.00 |

PPE RENTAL PROVISIONS

GEAR QUALITY Rental gear meets NFPA 1971 and NFPA 1851. Coats and pants will always be the same color and from the same manufacturer, per ensemble.

DELIVERY All ensembles will be delivered to the designated location approximately (3-7) days prior to the inception of the training period.

REPLACEMENTS Replacement PPE items for size, defects occurred during training will be processed within 24 hours of request receipt and the corresponding cost is included in the initial rental fee.

SHIPPING Includes outbound freight and replacement elements, if applicable.



Mendocino College

1000 Hensley Creek Rd • Ukiah, CA 95482
(707) 468-3000 • www.mendocino.edu

APPLICATION FOR ADMISSION

Ukiah Campus: 1000 Hensley Creek Road, Ukiah, CA 95482
Willits Center: 11 Marin Street, Willits, CA 95490
Lake Center: 1005 Parallel Drive, Lakeport, CA 95453

USE DARK BLUE OR BLACK PEN ONLY

Have you ever submitted an application to Mendocino College? Yes No Year? _____ Name, if different _____

Please check one and indicate year: _____ Summer _____ Fall _____ Summer & Fall _____ Spring _____ Year _____

Social Security Number: _____

Colleague ID #: _____

The voluntary provision of your social security number will be used to assist the state of California in evaluating community college student success. Not providing your social security number could delay financial aid processing and accurate IRS reporting for tax credits.

Legal Name: _____
Last First Middle

Residence Address: _____
Street Apt/Unit # City State Zip

Mailing Address: _____
(If different from residence address) Street / P.O. Box Apt/Unit # City State Zip

Phone Numbers: _____
Home Work Ext Cell

Email Address: _____

Date of Birth: _____ Age: _____ Gender: Female Male
Month Day Year

Race / Ethnicity: Are you Hispanic or Latino? Yes No What is your race or ethnicity? Check one of the following:

- | | | | | |
|--|---|---|--|--|
| <input type="checkbox"/> AC Chinese | <input type="checkbox"/> AL Laotian | <input type="checkbox"/> B Black, African American | <input type="checkbox"/> HS South American | <input type="checkbox"/> PG Guamanian |
| <input type="checkbox"/> AI Asian Indian | <input type="checkbox"/> AM Cambodian | <input type="checkbox"/> F Filipino | <input type="checkbox"/> HX Other Hispanic | <input type="checkbox"/> PH Hawaiian |
| <input type="checkbox"/> AJ Japanese | <input type="checkbox"/> AV Vietnamese | <input type="checkbox"/> HM Mexican, Mexican American | <input type="checkbox"/> N American Indian, Alaskan Native | <input type="checkbox"/> PS Samoan |
| <input type="checkbox"/> AK Korean | <input type="checkbox"/> AX Other Asian | <input type="checkbox"/> HR Central American | <input type="checkbox"/> O Other Non-White | <input type="checkbox"/> PX Other Pacific Islander |
| | | | | <input type="checkbox"/> W White, Non-Hispanic |

1. List your Mendocino College Major Code
Select code from the Mendocino website _____

4. Citizenship (select one)
____ 1 U.S. Citizen
____ 2 Permanent Resident
Alien number: _____ Date issued: _____
____ 3 Temporary Resident/Amnesty
Alien number: _____ Date issued: _____
____ 4 Refugee/Asylee Alien number: _____
____ 5 Student Visa (F1)
____ 6 Other Status _____ I-94 expires: _____

2. Admit Status (check one):
____ SPAD (Special Admit) - Currently enrolled in K-12th grade
** A completed Special Admission Application is required before Registration may occur.**
____ NEW - First time college student
____ TRA (New Transfer) - Attended college but not Mendocino
____ RET (Returning) - Attended Mendocino but not last semester

5. Country of Citizenship, if other than U.S. citizen _____

3. Educational Goal (check one only)
____ A Transfer with AA/AS Degree
____ B Transfer without AA/AS Degree
____ C Obtain AA/AS Degree without transfer
____ D Vocational Degree Job Related Training
____ E Vocational
____ F Formulate career plans
____ G Acquire job skills
____ H Update job skills
____ I Certificate/Licensing Requirements
____ J Intellectual/Cultural development
____ K Basic English/reading/math skills
____ L Credit for HS Diploma/GED
____ M Undecided
____ N Move from noncredit to credit coursework
____ O 4 year college student completing 4 year college requirements

6. Institutions Attended:
a. High School: _____
City: _____ State: _____
Date Attended: _____ to _____
Graduated: Yes No
If no, what month and year do you plan to graduate? _____
b. Most recent college attended:
Name: _____
City: _____ State: _____
Years attended: _____ to _____
Graduated: Yes No Type of Degree: _____

7. Highest level of education you have completed? (Select one)
Educational Status: Graduation Type:
____ 0 Not a HS graduate/no longer in HS
____ 1 Special Admit (enrolled in grades K-12)
____ 2 Currently in Adult School
____ 3 High School graduate
____ 4 Received GED/Certificate of Equivalency
____ 5 Received Certificate High School Proficiency
____ 6 Foreign secondary school diploma
____ 7 Received Associate Degree
____ 8 Received Bachelor Degree or higher

BE SURE TO ANSWER ALL QUESTIONS AND SIGN BELOW:

Answers to the following questions will be used to determine your residency for tuition purposes. Please be advised that additional information may be required.

8. Date of Entry to California (required information)

9. Place of birth (state or country): _____

10. Have you continuously lived in California for the last 2 years?

Yes No

If no, list states lived in during the last two years, with dates and answer Questions #12-#21

State _____ from _____ to _____
State _____ from _____ to _____

11. My intent is to make California my permanent home.

Yes No If no, where? _____

12. Have you filed a Resident California Tax Return in the last two years?

Yes No If no, why not? _____

13. What was the source of your financial support for the past year?

____ Parent or guardian
____ Employment
____ Other: *List source* _____

14. Driver's License / ID number: _____

State: _____ Original Date Issued: _____

15. Vehicle Registration: State _____

16. Registered to Vote? Yes No State _____

Date Registered: _____

THE FOLLOWING ARE TO BE COMPLETED BY ACTIVE MILITARY PERSONS OR VETERANS DISCHARGED WITHIN THE LAST YEAR.

17. When did your tour begin in California? _____

Stationed where and dates _____

How long (continuously) living in California, if at all _____

18. What is your State of Legal Residence on military records? _____

19. Date joined _____ Date separated active duty, if any _____

20. Are you a dependent of an active military person? Yes No

21. If yes, please answer the following as it pertains to the serviceperson:

Name _____ Relationship _____

State regarded by that person as permanent home _____

Permanent Address _____

Present actual whereabouts _____

How long (continuously) living in California, if at all _____

COMPLETE THE FOLLOWING IF YOU ARE UNDER 19 YEARS OF AGE AND UNMARRIED

Parent/Guardian Name _____

Address _____

My parent/guardian has lived in California? Yes No If Yes, since when? _____

CERTIFICATION

SELECTIVE SERVICE POLICY: *If you are a male U.S. citizen or male alien living in the United States whose age is 18 through 25, you have an obligation to register in accordance with the Federal Military Selective Service Act (50 U.S.C. APP 451 et seq.) Additional information can be obtained at the U.S. Post Office or at the web site of the Selective Service whose URL is <http://www.sss.gov/>*

FERPA POLICY: *Under notification of the family Education Rights and Privacy Act, you may, at the time you actually enroll, direct the college to withhold release of directory information to persons not employed by the college. Directory information includes your name, date and place of birth, major field of study, participation in activities and sports, weight and height of athletic team members, dates of attendance, degrees and awards, and the most recent school attended. If you do not want Mendocino College to release Directory Information check this box.*

All of the information in this application pertains to me. I declare under penalty of perjury that the statements and information submitted in this application are true and correct. I understand that falsification, withholding pertinent information, or failure to report changes in residency, may result in District Action. All materials and information submitted by me for purposes of admission become the property of Mendocino College.

SIGNATURE OF STUDENT: _____ **DATE:** _____

OFFICE USE ONLY

Non-resident (NS) State _____ Non-resident (NC) Country _____ Initials _____ Date _____



Mendocino College

Medical Clearance for FSC-68

To successfully pass the physical fitness portion of the Wildland Firefighting course (FSC-68), each student must complete the physical regimen test listed below.

The first 3 activities must be completed within 6 minutes and the fourth in the time specified. Please note that this form can be used *within one year of the date the form is signed off by the physician*. If you begin the course more than a year after this date, *it will be necessary to have the form completed by a physician again*.

I. Hose Drag: The recruit will run approximately 100 yards pulling 200 feet of 1-3/4 inch hose line. The recruit will then pull all hose hand-over-hand into a pile.

II. Hose Pack Carry: The recruit will pick up a 75 lb. banded hose pack and proceed up to the third floor of the tower (stepping on each step), place it down and conduct test item 3 (see below). After Test Item 3 is completed, recruit will carry same pack back down the tower.

III. Three Story Hose Hoist: The recruit will lean out the third floor window of the tower (with safety line attached to SCBA) and pull up the hose roll hand over hand (the weight of the hose is approximately 45 lbs). The top of the hose bundle must touch the bottom of window sill, then be lowered to the ground. Sliding the rope through the hands is not allowed.

IV. Cardiovascular Test: The recruit will run 1.5 miles in under 15 minutes. While not part of the physical fitness test, during the Self-contained breathing apparatus (SCBA) test, the recruit will strike an object with an 8 lb sledge hammer 20 times while wearing the SCBA.

In addition to the physical regimen test listed above, the recruit should also be able to walk, run, jump, twist, bend and lift 25 plus pounds for extended periods of time during the Wildland Firefighting course.

Your evaluation of the recruit should also take this into consideration.

Student Name (please print): _____

The above-named student is physically fit to participate in the above-described test and course; I have authorized him/her to participate in this test and course.

Print Name of Physician

Signature of Physician

Date

Please provide clinic/agency stamp below

THIS FORM VALID FOR ONE YEAR FROM DATE OF EXAMINATION