



# Stafford County Fire & Rescue Department

1225 Courthouse Road – Stafford, Virginia 22554

Phone: (540) 658-7200 Fax: 540-658-4545



## TRAINING REQUEST FORM

APPLICANTS: Please complete this form and forward to your Station Chief or Training Officer,  
If approved, the Station Chief or Training Officer will submit the approved application to

[SCFRDTRAINING@co.stafford.va.us](mailto:SCFRDTRAINING@co.stafford.va.us)

### COURSE INFORMATION

Course Requested: \_\_\_\_\_

Starting Date of Course: \_\_\_\_\_ Course Location: \_\_\_\_\_

### STUDENT INFORMATION

Full Name: \_\_\_\_\_ Rank: \_\_\_\_\_

Male:  Female:  Date of Birth: \_\_\_\_\_ Last 4 of Social Security #: \_\_\_\_\_

Home Address: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Check One: Volunteer:  Career:  Non-Fire/Rescue:  Jurisdiction/County: \_\_\_\_\_

Department Name: \_\_\_\_\_ Stafford County ID Number: \_\_\_\_\_

Highest Level Certification FIRE: \_\_\_\_\_ EMS : \_\_\_\_\_

Comments:

\*All Students must be a minimum of 16 years of age for all programs, and at least 18 years of age for all HTR Courses

### NOTICE

**IMPORTANT:** This Training Request Form will **ONLY** be accepted if a training announcement has been posted. Training Requests not completely filled out will be returned for re-submittal, which may result in rejection due to limited class size.

Understand that certain segments of this training may be physically demanding. If you have any questions on the physical requirements, or if you need special accommodations to complete the program's activities, please notify the Course Coordinator immediately.

If accepted into the training program, understand that it is your responsibility to attend all required classes.

### TRAINING DIVISION USE ONLY

Date Received: \_\_\_\_\_ Comments:

Approved

Denied

\_\_\_\_\_  
Training Division Signature

\_\_\_\_\_  
Date

## **ELECTRONIC TRAINING REQUEST FORM PROCEDURE**

1. Open the electronic “Training Request Form” located on the Stafford County Fire & Rescue website ([www.staffordfirerescue.com](http://www.staffordfirerescue.com)) under the Training Opportunities Section. This site may be accessed from any computer with internet access and Adobe Reader Installed.
2. Complete **ALL** fields of the Training Request Form under “Course Information” and “Student Information.” Please do not leave any field blank, use N/A or None as appropriate.
3. After completion of the form save it to your computer in a place that you will be able to locate it (i.e. Desktop) using the following format: {COURSE REQUESTED} {space} {YOUR FIRST INITIAL}{YOUR LAST NAME}. For example, if you are applying for Firefighter 1 and 2 and your name is John Doe, save as “FF1&2 JDoe”. If you are applying for EMT-B and your name is Sally Smith, save as “EMT-B SSmith”.
4. Send an e-mail with the completed Training Request Form attached to your Station Chief or His or Her Designee (ie. Training Officer). **The Station Chief or designee will send the completed and approved training request form to [scfrdtraining@co.stafford.va.us](mailto:scfrdtraining@co.stafford.va.us)**
5. Copies of pre-requisites (ie. Certifications, proof of age, high school diploma, etc.) as listed on the Training Announcement may be either sent to Headquarters, or scanned and attached electronically to the email submission of your Training Request Form.
6. Within five full working days of the registration closing date for each training course, the course coordinator or designee will send an email to those who submitted a Training Request Form indicating whether the student is enrolled in the course, placed in a pending status, or denied entrance into the program. If enrolled, the time, date, and location of first class will be included. If enrollment was not granted, the email shall provide an explanation for the denial.

### **Station Chief / Training Officer:**

1. Upon review of your member’s Training Request Form email, please forward their email with form attached indicating your approval/endorsement in the email to [SCFRDTraining@co.stafford.va.us](mailto:SCFRDTraining@co.stafford.va.us).
2. You **MUST** include in the subject line the name of the applicant and the course they are applying for (i.e. FF1&2 J Doe or EMT-B SSmith). Use this format for all correspondence concerning this student.
3. A separate email for each applicant and course must be submitted separately.

**Training Request will only be accepted after the Training Announcement for the class has been posted.**

**Any e-mail with multiple requests will be returned for individual submission.**