

Residents Fire Academy Application



Thank you for your interest in becoming a part of the Oklahoma City Fire Department Residents Fire Academy. The Residents Fire Academy is an 8 week program, which meets on Tuesday evenings from 6:00 - 9:00 pm. Attendance is the most important factor in reaching the desired goal of the program. Absences are permitted; however, attendance is encouraged.

Name (Last, First Middle): Age: Date of Birth:		Social Security Number:			
Race/Sex:			-		
Address:		City:	State:_	Zip:	
Address: Phone- Home:	Cell:		Work:		
Email (personal):		(work):			
Place of Employment:					
Business Address:					
Criminal History and Driving Record					
Oklahoma Drivers License Numb	Expires	S:			
Has your license ever been susper		YES	NO		
Have you ever been convicted of	one)	YES	NO		
If yes, please provide information	, such as date of	arrest, charge, dis	sposition of case.		
	· ·				
Signature of Acknowledgment					
certify that all statements made	on this application	n are true and cor	nnlete Lunderstand	that I may be re	ejected

for submitting incomplete or false information. I hereby authorize the employees of the Oklahoma City Police Department to make an examination of the above information for the purpose of evaluating my application. IMPORTANT: This training is not designed to certify citizens to perform fire department services. The purpose is to enhance community relations and to provide citizens with insights into the fire department emergency response system.

By signing, I am saying that I agree to the provisions of this release.

Signature, Printed Name, and Date

Oklahoma City Fire Department Attention: Major Dale Cason 2300 General Pershing Blvd. Oklahoma City, OK 73107 405-297-3318 Fax: 405-316-3450

All applicants must either reside or work in Oklahoma City to be considered. Must be 18 years old or older to attend.