



CFCA SAFER GRANT: PRE-QUALIFICATION APPLICATION

The Connecticut Fire Chiefs Association has limited SAFER GRANT funds available to deliver or assist with the reimbursement of basic Firefighter courses and NFPA 1582 physicals. If your agency needs assistance in these areas, and has limited or zero funding available, the CFCA may be able to assist you. Please identify your needs by completing the following information.

REQUIREMENT FOR NFPA 1582 PHYSICAL REIMBURSEMENT:

- Departments should provide proof of payment with invoice and acknowledge it was NFPA 1582 compliant and for a new volunteer
- Reimbursements will be for new operational firefighters who are volunteers
- There is a departmental financial cap of \$2,400.
- Application period is open from April 1, 2017 – May 31, 2017
- Notification date of reimbursement award will be July 1, 2017
- Reimbursements will be processed within 30 days of award

NFPA 1582 Physicals: Yes No

How many people do you anticipate reimbursing? ___

REQUIREMENT FOR BASIC FIREFIGHTER COURSE REIMBURSEMENT:

- Departments should provide a proof of payment with invoice
- Reimbursements will be for operational firefighters who are volunteers
- Basic Firefighter training must be delivered by the Connecticut Fire Academy, a recognized regional fire school, or a fire department approved by the Volunteer Workforce Solutions program
- Proof of class completion and certification will be required for reimbursement
- Reimbursement will be for 50 % of training costs
- Application period is open from April 1, 2017 – May 31, 2017
- Notification date of reimbursement award will be July 1, 2017
- Reimbursements will be processed within 30 days of award

PLEASE IDENTIFY YOUR NEEDS BELOW:

Basic Firefighter Training: FF 1 FF 2 Hazmat Awareness Hazmat Operations EVOC EMR EMT

How many people do you anticipate reimbursing? ___

Your Agency Name: _____

Mailing Address: _____

City or Town (In which the agency is located): _____

Agency Type: Volunteer Combination

Agency Fire Chiefs Name: _____

Phone (Office): _____ Phone (Cell): _____ Email: _____

Operational Personnel: ___

Stations Operating Under Agency Name: _____

Thank you for your time and interest. Please complete the form as soon as possible and send to Fred Dudek via email at dudekaf@gmail.com by May 31st, 2017.