Certificate of Fitness Alternative Issuance Procedure D-10 FIRE AND EMERGENCY DRILL CONDUCTOR FOR NYC K-12 SCHOOLS

<u>Applicant Affirmation Form</u>
(Used by Individual Applicants only, PRINT all information requested)

This form must be completed by the applicant for the application to be valid.

SECTION 1: EMPLOYER I	NFORMATION					
School name:						
School address :	City		State	_Zipcode		
(The actual school location that	this COF will be used fo	r.)				
Name of Designated Coordinate	or:		; □ N/A	A		
Email of Designated Coordinat	or:		@		; □ N/A	
Contact phone # of Designated	Coordinator:		; 🗆 N/A			
SECTION 2: APPLICANT I	NFORMATION					
First name:	_ Last name:	MI	_ Last 4 digits of SSI	N: XXX-XX		
Contact phone:	Email:		<u></u>			
Mailing address :	City	<i></i>	State	Zipcode_		
Experience in the related field:	years.					
SECTION 3: DECLARATION						
I,						
otherwise, either as a gratuity including but not limited to gift I also understand that the Fire I	s, cash, favors, meals and Department reserves the ri	trips.	ll up to test the applic	ants who are is		
AIP. Applicant who has failed to On this day of affixed my signature and I certificate Penal Law and NYC Administration.	fy that, subject to penalty	, in th of fine o	e year or imprisonment pursu	, I have herewant to the New		
☐ I hereby authorize my emplo application(s). (Check if your e	mployer is submitting the	applicat	ion for you)	my C of F		
Signature of Applicant:			Date:		_	

Rev.12-2021	FIRE DEPARTMENT - CITY OF NEW YORK			
SECTION 4: EDUCATION, LICENSE, AND EXPERIENCE REQUIREMENT (You must attach the copy of the license documentation along with your application)				
10 0	t Principal approved by the NYC Department of Education (DOE);			
☐ A certificate or letter of	n the Department of Education's official letter head stating that the applicant has appleted General Response Protocol (GRP) training			
SECTION 5: RECOMMEN	DATION LETTER			
applicant's full name, experier completed General Response I • Sample of recomme	statement on the Department of Education's official letterhead, and must state the ace, the address where the applicant will work, and has participated in and Protocol training and physically able to perform the job. endation letter: ssets/fdny/downloads/pdf/business/cof-samplerec-letter.pdf			
SECTION 6: PHOTO REQ	UIREMENT			
<u> </u>) in JPG or JPEG format. File name should be named with applicant's first and			
	N FEE AND PROCEDURES			
	s certificate is \$ 25. The application and fee must be submitted online.			
	cion and payment can be found here:			
	dny/downloads/pdf/business/fdny-business-cof-individuals.pdf			
	OF ALL SUPPORTING DOCUMENTS NEEDED to review if you have prepared and scanned the following materials that are			
required to be uploaded to sub	, , , ,			
☐ This completed and no				
☐ All required documents☐ A recommendation lett				
☐ A recent photo in JPG	er with company letterhead. or JPEG format.			
-	E184450			
•	the QR code) to learn how to APPLY ONLINE: ny/downloads/pdf/business/fdny-business-cof-individuals-short.pdf			
SECTION 9: STATEMENT	S & SIGNATURES			
statements or inaccurate information	bound by what is stated in this application and will be responsible for any false nation. I hereby solemnly swear under oath and subject to penalty of perjury that e in this application is true and accurate to the best of my knowledge.			

Applicant's print name	Notarization (required for individual applicant) State of New York, county of:	Notary Seal
Applicant's signature Date	Sworn to or affirmed under penalty of perjuryday of20 Notary Signature	