Station Assignment Request Form

Name: _____ **Rank:** Firefighter _____

Hire Date: _____

Promotion Date (If applicable): _____

☐ **Acting Officer (Must have all required classes)**

☐ **Special Ops Cert (All five disciplines/operations or technician level)**

☐ **Haz-mat Tech**

☐ **Paramedic**

☐ **EMT**

☐ **Water Rescue Training/FLSA**

☐ **Driver/operator engine (qualified per ECFR policy)**

☐ **Driver/operator aerial (qualified per ECFR policy)**

The above listed certifications and training will be considered when assigning personnel to stations to maintain operational efficiency. Please list the station you most desire to be assigned to starting on line 1 and complete line 2 through 5 in descending in priority.

1. **Station:**

2. **Station:**

3. **Station:**

4. **Station:**

5. **Station:**