# "Responding To Ethanol Incidents" (RTEI) Training Program

## *STUDENT ENROLLMENT APPLICATION*

**Name (Last, First, M.I.)** **SS #** **Date of Birth** **Age**

**Street** **City** **State** **Zip**

**Telephone (including Area Code): Day** _____ **Evening:**_____

**Email address** _____**County** _____

**Emergency Service or Municipal Affiliation** **Municipality**

**Canton Fire Department Social Hall - Canton, PA** **May 12, 2012 8 a.m. to 5 p.m.**

**Course Location Requested (ONE location only)** **Date(s) of Requested Course Offering**

**VERIFICATION AND AUTHORIZATION (To be signed by the chief operational officer, training officer, or other official of the applicant's organization): My signature below attests that the applicant is a bona-fide member of the above organization; is attending the requested course as a representative of that organization; is covered by this organization's worker's compensation insurance while attending.**

**Officer Signature** **Printed Name** **Title** **Date**

**REQUEST FOR ENROLLMENT: (To be signed by the applicant): I hereby request that I be enrolled in the above course. I attest that all information herein is true and correct. I agree to report at the time and place scheduled and will notify the Academy if I am unable to attend.**

**Applicant Signature** **Date**

**No late enrollments will be accepted. APPLICATION MUST BE REC'D AT THE PSFA NO LATER THAN NOON on 4-20-2012. Maximum class size is 40 students.**

***RETURN TO :***

***PENNSYLVANIA STATE FIRE ACADEMY***
***1150 RIVERSIDE DRIVE***
***LEWISTOWN, PA 17044***
***ATTN: PAT PAULY***