FIREFIGHTER II

PRACTICAL SKILLS MATERIALS

Based on NFPA 1001: Standard for Fire Fighter Professional Qualifications, 2019 Edition.



ALABAMA FIRE COLLEGE

June 22, 2020



Firefighter II Instructional JPR Verification Sheet

| Full Name: | | Fire Department | ! |
|-----------------------------------|---|---|---------------------------|
| Skill Sheets N | nal JPR Verification Sheet is to be use FPA 1001, <i>Standard for Fire Fighter I</i> ht and assessed during the course. This | Professional Qualifications, 2019 Edit | ion. Each of these skills |
| listed below. The evaluator after | mination for Certification: Skills test The skills will be randomly drawn by the all training hours have been completed a competency (including critical points) | ne Certification Staff and administered d. For successful completion of the pra | by an approved |
| | Mandatory Skills that must be comple submitted to Certification. (Skill Shee | | /approved skills |
| evaluator and | Submitted to Certification. (Skiii Shee | :ts. 15-1, 15-2, 22-5 ₁ | |
| Skill Sheet | Prin | nary Task | JPR(s) Covered |
| 17-1 | Assisting Rescue Team | | 5.4.2 |
| 17-2 | Vehicle Extrication | 5.4.1 | |
| 18-1 | Ignitable Liquid Fire | 5.3.1 | |
| 18-2 | Flammable Gas Fire | 5.3.3 | |
| 19-1 (M) | Fire Ground Communications | & Transfer/Assume Command | 5.1.2, 5.2.2 |
| 19-2 (M) | Coordinated Fire Attack | | 5.3.2 |
| 19-3 (Process) | Incident Report (use provided forms) | | 5.2.1 |
| 20-1 | Protecting Evidence | | 5.3.4 |
| 21-1 | Power Tool Maintenance | | 5.5.4 |
| 21-2 | Service Testing Fire Hose | | 5.5.5 |
| 22-1 (Process) | Home Fire Safety Survey (use pro | ovided forms) | 5.5.1 |
| 22-2 (Process) | Fire and Life Safety Education | (use provided forms) | 5.5.2 |
| 22-3 (M) (Process) | Pre-Incident Survey (use provided for | orms) | 5.5.3 |
| Course Loca | ation: | Course Dates: | |
| Instructor P | rinted Name: | Instructor Signature: | |
| Candidate P | rinted Name: | Candidate Signature: | |



Skill Sheet FFII - 17 - 1

Assisting Rescue Team

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.4.2

Condition: The candidate shall assist a rescue operation team by following proper procedures, selecting appropriate hand and power tools, and demonstrating the correct operation of the tools and the proper steps for the care and maintenance of these tools.

Scenario: Provided by Proctor/Evaluator

Expected time to complete skill(s): 10 minutes

| Criteria/Performance Steps: | | | Te | Test | | est | | |
|--|----------------------|---------------------------------|-----------|--------|-----------|-----------|--|--|
| Safely performs the following steps: | | | Р | F | Р | F | | |
| 1. Wears appropriate personal protective e | quipment – CF | RITICAL POINT | | | | | | |
| 2. Chooses the correct tool for the rescue s | ituation | | | | | | | |
| 3. Performs assigned team duties as per operating guidelines | | | | | | | | |
| 4. Works as a member of the team | | | | | | | | |
| 5. Ensures that all nonessential people are out of the work area by establishing barriers | | | | | | | | |
| 6. Identifies and retrieves all rescue tools | | | | | | | | |
| 7. Returns tools to a ready state | | | | | | | | |
| Candidate must successfully perform 5/7 steps including CRITICAL POINTS | | | | | Score | :/7 | | |
| Evaluator Notes | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Evaluator Print Name & | Date | Overall Skill Sheet Sco | | | | | | |
| Signature: | | Pass | Fail | | | | | |
| By my signature above, I verify that | l am currently | certified to the level I am tes | ting (AL/ | DR/IF | SACI | | | |
| Re-Test Evaluator Print Name & Signature | | Overall Skill Sheet Re- | | | 3AC) | | | |
| The rest Evaluator Film I value & Oi | griature. | | Fail | COIC | | | | |
| | | 1 433 | ı alı | - | | | | |
| By my signature above, I verify that | I am currently | certified to the level I am tes | ting (AL/ | PB/IFS | SAC) | | | |
| Candidate Print Name & Signature: | | Candidate: Print Nam | e or Ca | ndida | ate # | | | |
| | | | | | | | | |
| Note to Evaluator(s): By your signature a | | | | | | Fire Fire | | |
| College Evaluator, have followed AFC Tes | ting Policies a | nd have witnessed that the a | bove ca | ndidat | e has | | | |
| Note to Student: Skill will end when your | state or indicat | te to the evaluator that you h | ave com | nleted | l all the | <u> </u> | | |
| Note to Student: Skill will end when you state or indicate to the evaluator that you have completed all the identified steps. Notify the evaluator at ANY time that you have a safety concern. | | | | | | | | |



Skill Sheet FFII - 17 - 2

Vehicle Extrication

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.4.1

Condition: The candidate, wearing PPE, given a rescue scenario and working as part of a team shall demonstrate correct procedures for victim removal from a motor vehicle without causing additional injuries to victim and hazards are managed.

Scenario: Provided by Proctor/Evaluator

Expected time to complete skill(s): 10 minutes

| Criteria/Performance Steps: | | | | Те | st | Ret | est |
|--|----------------------|-------------------------------------|--------|-----------|--------|---------|------|
| Safely performs the following steps: | | | | Р | F | Р | F |
| 1. Wears appropriate personal protective e | quipment – CF | RITICAL POINT | | | | | |
| 2. Conducts scene size up and determines | hazards | | | | | | |
| 3. Establishes safe work areas by deploying traffic control devices and hand line | | | | | | | |
| 4. Performs vehicle stabilization correctly and maintains stabilization throughout | | | | | | | |
| 5. Operates hand and power tools as designed | | | | | | | |
| 6. Gains patient access properly and stabilizes victim | | | | | | | |
| 7. Protects patient and removes glass as necessary | | | | | | | |
| 8. Demonstrates acceptable techniques of | disentangleme | ent | | | | | |
| 9. Extricates victim without causing addition | nal injuries – C | CRITICAL POINT | | | | | |
| 10. Restores all equipment to a ready state | | | | | | | |
| Candidate must successfully perform 7/10 steps including CRITICAL POINTS | | | | | | Score | :/10 |
| | Evaluato | r Notes | | | | l . | |
| | | | | | | | |
| Evaluator Print Name & | Date | Overall Skill Sheet S | ooro | | | | |
| Signature: | Dale | Pass | Fa | | | | |
| - Oignaturo. | | 1 035 | ' ' ' | '' | | | |
| By my signature above, I verify that | am currently | certified to the level I am t | esting | g (AL/F | PB/IFS | SAC) | |
| Re-Test Evaluator Print Name & Signature | gnature: | Overall Skill Sheet R | | | core | | |
| | | Pass | Fa | ail | | | |
| By my signature above, I verify that | Lam currently | cortified to the level Lam t | octino | - / ΛΙ /E | DD/IEG | 240) | |
| Candidate Print Name & Signature: | | Candidate: Print Na | | | | | |
| Carranana i inin i iania a digitatana | | | | | | | |
| Note to Evaluator(s): By your signature a | above, you ver | I rify that you are qualified to | serv | e as a | n Alal | oama | Fire |
| College Evaluator, have followed AFC Tes | | | | | | | |
| tested the above skills in their entirety. | | | | | | | |
| Note to Student: Skill will end when you | | | ı have | comp | oleted | all the | , |
| identified steps. Notify the evaluator at AN | Y time that yo | u have a safety concern. | | | | | |



Skill Sheet FFII - 18 - 1

Ignitable Liquid Fire

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.3.1

Condition: The candidate, wearing PPE and SCBA, given foam and equipment and an assignment shall extinguish an ignitable liquid fire operating as a member of a team. The team will properly proportion, apply and maintain a foam stream and blanket to safely control the hazard.

Scenario: Provided by Proctor/Evaluator

Expected time to complete skill(s): 10 minutes

| Criteria/Performance Steps: | | | | Te | st | Ret | est |
|--|----------------|-----------------------------|---------|---------|--------|---------|------|
| Safely performs the following steps: | | | | Р | F | Р | F |
| 1. Dons full personal protective equipment accountability – CRITICAL POINT | including SCE | BA and maintains team | | | | | |
| 2. Identifies and provides means of retreat | and safe have | en | | | | | |
| Selects appropriate foam for the application | | | | | | | |
| 4. Correctly sets up equipment | | | | | | | |
| 5. Proportions foam in correct ratio | | | | | | | |
| 6. Handles hose line correctly advancing hose line as a team | | | | | | | |
| 7. Uses appropriate application techniques for foam/fuel type | | | | | | | |
| 8. Extinguishes fire safely and efficiently – CRITICAL POINT | | | | | | | |
| 9. Retreats as a team never turning away from the hazard | | | | | | | |
| Candidate must successfully perform 7/9 steps including CRITICAL POINTS | | | | | :/9 | Score | e:/9 |
| | Evaluato | r Notes | | | | | |
| Evaluator Print Name & | Date | Overall Skill Sheet S | Score |) | | | |
| Signature: | | Pass | Fa | ıil | | | |
| By my signature above, I verify that | am currently | certified to the level I am | testing | g (AL/F | PB/IFS | SAC) | |
| Re-Test Evaluator Print Name & Signature | gnature: | Overall Skill Sheet F | | | core | | |
| | | Pass | Fa | ail | | | |
| By my signature above, I verify that | I am currently | certified to the level I am | testing | g (AL/F | PB/IFS | SAC) | |
| Candidate Print Name & Signature: | | Candidate: Print Na | me d | or Ca | ndida | ate# | |
| | | | | | | | |
| Note to Evaluator(s): By your signature a College Evaluator, have followed AFC Test tested the above skills in their entirety. | | | | | | | Fire |
| Note to Student: Skill will end when you identified steps. Notify the evaluator at AN | | • | u have | e com | oleted | all the |) |



Skill Sheet FFII - 18 - 2

Flammable Gas Fire

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.3.3

Condition: The candidate, wearing personal protective equipment including SCBA, given a fire apparatus, and working as part of a team shall successfully control and extinguish a flammable gas fire.

Scenario: Provided by Proctor/Evaluator

Expected time to complete skill(s): 7 minutes

| Criteria: | | | To | est | Retest | |
|--|--------------|--------------------------------------|----------|--------|-----------|----------|
| Safely performs the following steps: | | | Р | F | Р | F |
| 1. Wears personal protective equipment ind | cluding SCBA | - CRITICAL POINT | | | | |
| 2. Identifies hazards then controls or avoids sources, approaches from the side of any t | | density of product, ignition | | | | |
| 3. Selects and advances fire hose correctly using a minimum of two 1 $\frac{1}{2}$ " hose lines capable of a fog stream | | | | | | |
| Ensures safe havens and accountability in place before advancing – CRITICAL POINT | | | | | | |
| 5. Uses streams effectively to protect and cool where necessary (fog for protection, straight stream for cooling) | | | | | | |
| 6. Shuts off fuel supply and retreats never turning away from fire | | | | | | |
| Candidate must successfully perform 5/6 steps including CRITICAL POINTS | | | | | Score:_/6 | |
| | | | | | | |
| Evaluator Print Name & | Date | Overall Skill Sheet So | | | | |
| Signature: | | Pass | Fail | - | | |
| By my signature above, I verify that | | | | | SAC) | |
| Re-Test Evaluator Print Name & Signature | gnature: | Overall Skill Sheet Re | | core | | |
| | | Pass | Fail | - | | |
| By my signature above, I verify that | | | | | | |
| Candidate Print Name & Signature: | | Candidate: Print Name or Candidate # | | | | |
| Note to Evaluator(s): By your signature a College Evaluator, have followed AFC Test tested the above skills in their entirety. | | | | | | Fire |
| Note to Student: Skill will end when you identified steps. Notify the evaluator at AN | | | have com | pleted | all the | , |

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Skill Sheet FFII - 19 - 1

Fire Ground Communications; Assume/Transfer Command

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.1.2, 5.2.2

Condition: The candidate, given a scenario and communication equipment, shall demonstrate assuming command of the scene, communicate the need for team assistance so that the supervisor (evaluator) is consistently informed of the team's needs, and demonstrate transfer of command.

Scenario: Provided by Proctor/Evaluator

Expected time to complete skill(s): 3 minutes

| Criteria/Performance Steps: | | | Te | est | Ret | est |
|--|------------------|-----------------------------------|---------|--------|---------|-----|
| Safely performs the following steps: | | | Р | F | Р | F |
| Evaluates the need to assume command performs a situational status report | l, gathers all n | ecessary information, and | | | | |
| 2. Ensures radio is working and is used cor | | | | | | |
| 3. Waits for open channel prior to transmitti | | | | | | |
| 4. Announces that command has been assu CRITICAL POINT | | | | | | |
| 5. Transmits necessary information (team needs, changing conditions) clearly, concisely, and with no codes | | | | | | |
| 6. Acknowledges incoming messages by br | | | | | | |
| 7. Uses radio phonetics correctly | | | | | | |
| 8. Evaluates the need for the transfer of corincoming commander (situational status reg |) | | | | | |
| 9. Announces transfer of command to all members on scene via radio – CRITICAL POINT | | | | | | |
| Candidate must successfully perform 7/ | 9 steps includ | ding all CRITICAL POINTS | Score | e:/9 | Score | :/9 |
| | Evaluator | Notes | I | | l | |
| Evaluator Print Name & | Date | Overall Skill Sheet Sco | е | | | |
| Signature: | | | ail | | | |
| By my signature above, I verify that I | am currently | certified to the level I am testi | ng (AL/ | PB/IF | SAC) | |
| Re-Test Evaluator Print Name & Signature & | gnature: | Overall Skill Sheet Re- | | core | | |
| | | Pass F | ail | ail | | |
| By my signature above, I verify that I | am currently | certified to the level I am testi | ng (AL/ | PB/IFS | SAC) | |
| Candidate Print Name & Signature: | | Candidate: Print Name | or Ca | ndida | ate# | |
| Note to Evaluator(s): By your signature a College Evaluator, have followed AFC Testested the above skills in their entirety. | ting Policies a | nd have witnessed that the ab | ove ca | ndidat | e has | |
| Note to Student: Skill will end when you sidentified steps. Notify the evaluator at AN | | | ve com | pleted | all the | ; |



Skill Sheet FFII - 19 - 2

Coordinated Fire Attack

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.3.2

Condition: The candidate, wearing full personal protective equipment including SCBA, given an interior attack line team and an assignment shall coordinate attacking an interior structure fire so that hazards are managed, and the fire is brought under control. The attack line shall be 1 ½" or larger.

Scenario: Provided by Proctor/Evaluator

Expected time to complete skill(s): 20 minutes

| Criteria/Performance Steps: | | | To | est | Ret | est | | |
|--|-----------------|--------------------------------------|------------|--------|---------|--------------|--|--|
| Safely performs the following steps: | | | Р | F | Р | F | | |
| 1. Selects proper hose and collects all tools | necessary fo | r entry | | | | | | |
| 2. Assembles team and ensures team acco | ountability | | | | | | | |
| 3. Identifies and controls hazards | | | | | | | | |
| Bases method of attack on known or suspected fire location | | | | | | | | |
| 5. Monitors and communicates changing conditions | | | | | | | | |
| 6. Identifies, communicates, and coordinate | es the need fo | r search, rescue, ventilation | | | | | | |
| 7. Accounts for all personnel and equipmer | nt at end of as | signment – CRITICAL POIN | IT | | | | | |
| Candidate must successfully perform 5/7 steps including CRITICAL POINTS | | | | | Score | e:/7 | | |
| Evaluator Notes | | | | | | | | |
| | | | | | | | | |
| Evaluator Print Name & | Date | Overall Skill Sheet Sc | | | | | | |
| Signature: | | Pass | Fail | - | | | | |
| By my signature above, I verify that | am currently | certified to the level I am tes | sting (AL/ | PB/IFS | SAC) | | | |
| Re-Test Evaluator Print Name & Signature | gnature: | Overall Skill Sheet Re | -Test S | core | | | | |
| | | Pass | Fail | - | | | | |
| By my signature above, I verify that | I am currently | certified to the level I am te | sting (AL/ | PB/IF | SAC) | | | |
| Candidate Print Name & Signature: | | Candidate: Print Name or Candidate # | | | | | | |
| Note to Evaluator(s): By your signature a College Evaluator, have followed AFC Test tested the above skills in their entirety. | | | | | | Fire | | |
| Note to Student: Skill will end when you sidentified steps. Notify the evaluator at AN | | | nave com | pleted | all the |) | | |

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ALABAMA FIRE COLLEGE Revised- 12/16/19



Process/Skill Sheet FFII - 19-3

Incident Report

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.2.1

Condition: The candidate, given a scenario and incident report forms and using operating guidelines, shall complete a basic incident report so all pertinent information is recorded, the information is accurate, and the form is complete.

Scenario: Provided by Proctor/Evaluator (use provided form)

Expected time to complete skill(s): 5 minutes

| Criteria/Performance Steps: | | | Te | est | Ret | est |
|---|-----------------|----------------------------------|----------------|----------------------|---------|------|
| Safely performs the following steps: | | | Р | F | Р | F |
| Completes a basic incident report | | | | | | |
| 2. Enters all information in correct locations | | | | | | |
| 3. Writes or types legibly and grammatically | correct. | | | | | |
| 4. Uses codes correctly | | | | | | |
| 5. Ensures report comments are factual and | written objec | tively | | | | |
| Candidate must successfully perform 4/5 steps including CRITICAL POINTS | | | Score | e:/5 | Score | :/5 |
| Evaluator Notes | | | | | | |
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| | | | | | | |
| <u> </u> | Б., | | | | | |
| Evaluator Print Name & Signature: | Date | Overall Skill Sheet Sco | | | | |
| | | Pass | Fail | | | |
| By my signature above, I verify that I | am currently | certified to the level I am test | ing (AL/I | PB/IFS | SAC) | |
| Re-Test Evaluator Print Name & Sig | nature: | Overall Skill Sheet Re- | Test So | core | | |
| | | Pass | Fail | | | |
| Diversi signatura abaya I yarifu that I | | soutified to the level Love too | .i.a. / A I /I | | 240) | |
| By my signature above, I verify that I Candidate Print Name & Signature: | am currently | Candidate: Print Name | | | | |
| Candidate Fillit Name & Signature. | | Candidate. Fillit Nami | oi Ca | Tiulua | ale # | |
| Note to Evaluate #/a). Dy your signature of | 2010 11011 1101 | if that you are gualified to a | 271/0 00 0 | νο ΛΙοΙ | 0000 | -iro |
| Note to Evaluator(s): By your signature at College Evaluator, have followed AFC Testi | | | | | | -ire |
| tested the above skills in their entirety. | _ | | | | | |
| Note to Student: Skill will end when you st | | | ave com | p <mark>leted</mark> | all the | |
| identified steps. Notify the evaluator at ANY | time that you | | | | | |

Page 1 of 1



| Fire Incident Report | | | | | | | | | |
|--|---------------------|---|---|---|--|--|--|--|--|
| | | | | | | | | | |
| | | <u> </u> | _ | | | | | | |
| Run Numb | er: | Report Prepared By: | | Report Prepared Date: | | | | | |
| En-Route | Гіme: | Arrival Time: | | In-Service Time: | | | | | |
| Situation Found: Structure Fire Brush/Grass Fire Vehicle Fire Refuse Fire Controlled Burn False Alarm/False Call | | | Action Taken: Extinguishment Remove Hazard Investigate Only Other | | | | | | |
| | Address: Te | | Telephone: | | | | | | |
| | Owner's Name (If No | t Occupant): | ne: | | | | | | |
| ☐ YES ☐ NO ☐ YES | | Firefighter Injury/Death: YES NO Number of Stories Below Ground: | | Fire Cause Determination: Accidental Natural Incindiary Undetermined Construction Type: | | | | | |
| | | | | | | | | | |
| t: | Smoke Detectors Pre | sent: | Exposures | :: | | | | | |
| : | | | Other Hazards Noted: | | | | | | |
| or Vehicle | Fires Only | | | | | | | | |
| Make: | | Model: | | License Number: | | | | | |
| | | | | | | | | | |
| | Run Numb En-Route | Run Number: En-Route Time: Address: Owner's Name (If No Pirefighter Injury/Dec No Number of Stories Beatt: Smoke Detectors Pre YES No Utilities Disconnected Sector Vehicle Fires Only | Run Number: Run Number: Report Prepared By: Arrival Time: Action Taken: Extinguishment Remove Hazard Investigate Only Other Address: Owner's Name (If Not Occupant): Firefighter Injury/Death: YES NO It: Number of Stories Below Ground: The Smoke Detectors Present: YES NO Utilities Disconnected by FD/Util. Co.: Electricty Gas Water Or Vehicle Fires Only | Action Taken: Extinguishment Remove Hazard Investigate Only Other Owner's Name (If Not Occupant): Alarm Time Firefighter Injury/Death: Fire Cause Accident YES | | | | | |



Skill Sheet FFII - 20 - 1

Protecting Evidence

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.3.4

Condition: The candidate, wearing personal protective equipment and given a scenario, shall identify evidence and take appropriate measures to note and protect it from further disturbance until fire investigators can arrive on the scene.

Scenario: Provided by Proctor/Evaluator

Expected time to complete skill(s): 5 minutes

| Criteria: | | | Te | Test | | est | | | |
|---|-----------------|---|----------|---------|----------|------|--|--|--|
| PROTECTING EVIDENCE | | | Р | F | Р | F | | | |
| 1. Secures the scene and identifies area of | origin | | | | | | | | |
| 2. Preserves evidence properly and avoids handling unless necessary to extinguish the fire or prevent destruction of the evidence | | | | | | | | | |
| 3. Notifies fire investigator | | | | | | | | | |
| 4. Records information about evidence in regard to location and appearance | | | | | | | | | |
| Candidate must successfully perform 3/4 steps | | | | e:/4 | Score | e:/4 | | | |
| | Evaluato | r Notes | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |
| | | | | | | | | | |
| Evaluator Print Name & | Date | Overall Skill Sheet Sco | | | | | | | |
| Signature: | | Pass F | ail | | | | | | |
| By my signature above, I verify that | l am currently | certified to the level I am testi | na (Al / | PR/IFS | SAC) | | | | |
| Re-Test Evaluator Print Name & Signature | | Overall Skill Sheet Re- | | | <i>(</i> | | | | |
| The rest Evaluator raine a sign | griataro. | | ail | 0010 | | | | | |
| | | . 466 | <u> </u> | - | | | | | |
| By my signature above, I verify that | I am currently | certified to the level I am testi | ng (AL/ | PB/IFS | SAC) | | | | |
| Candidate Print Name & Signature: | • | Candidate: Print Name | or Ca | ndida | ite# | | | | |
| | | | | | | | | | |
| Note to Evaluator(s): By your signature a | above, you ver | r <mark>ify that you are qualified to se</mark> | rve as a | an Alal | oama | Fire | | | |
| College Evaluator, have followed AFC Tes | ting Policies a | nd have witnessed that the al | ove ca | ndidat | e has | | | | |
| tested the above skills in their entirety. Note to Student: Skill will end when you s | etato or indice | to to the evaluator that you be | vo com | nlotod | all the | | | | |
| identified steps. Notify the evaluator at AN | | | ve com | hieren | an tric | | | | |

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ALABAMA FIRE COLLEGE Revised- 12/16/19



Skill Sheet FFII - 21 - 1

Power Tool Maintenance

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.5.4

Condition: The candidate given a power tool shall demonstrate the correct care, servicing and maintenance

of the equipment.

Scenario: Provided by Proctor/Evaluator

Expected time to complete skill(s): 7 minutes

| Criteria/Performance Steps: | | | | Test | | Ret | est | |
|--|------------------|--------------------------------------|------------|---------|--------|---------|-----|--|
| Safely performs the following steps: | | | | Р | F | Р | F | |
| 1. Selects correct tool and checks all fluid le | evels | | | | | | | |
| 2. Inspects all electrical equipment for dam | age or worn c | omponents | | | | | | |
| Operates all equipment according to ma equipment is working properly | nufacturer's g | uidelines ensuring all | | | | | | |
| 4. Cleans equipment after use and refuels | if necessary | | | | | | | |
| 5. Identifies procedures for reporting defective equipment and completes recording procedures | | | | | | | | |
| Candidate must successfully perform 4/5 steps including CRITICAL POINTS | | | | | e:/5 | Score | :/5 | |
| Evaluator Notes | | | | | | | | |
| Evaluator Print Name & | Date | Overall Skill She | et Score | 7 | | | | |
| Signature: | Bato | Pass | Fa | | | | | |
| 3 | | . 5.55 | | | | | | |
| By my signature above, I verify that | am currently | certified to the level I | am testin | g (AL/I | PB/IFS | SAC) | | |
| Re-Test Evaluator Print Name & Signature & | gnature: | Overall Skill She | et Re-Te | est So | core | | | |
| | | Pass | Fa | ail | | | | |
| By my signature above, I verify that | I am currently | certified to the level I | am testin | a (AL/I | PB/IFS | SAC) | | |
| Candidate Print Name & Signature: | • | Candidate: Print Name or Candidate # | | | | | | |
| Note to Evaluator(s): By your signature a College Evaluator, have followed AFC Test tested the above skills in their entirety. | sting Policies a | nd have witnessed tha | at the abo | ve car | ndidat | e has | | |
| Note to Student: Skill will end when you identified steps. Notify the evaluator at AN | | | • | e com | pleted | all the |) | |

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ALABAMA FIRE COLLEGE Revised- 12/16/19



Skill Sheet FFII - 21 - 2

Service Testing Fire Hose

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.5.5

Condition: The candidate, wearing personal protective clothing, given a pump, a marking device, pressure gauges, a timer, record sheets, and related equipment, shall perform a service test on fire hose so that procedures are followed, the condition of the hose is evaluated, any damaged hose is removed from service and the results are recorded.

Scenario: Provided by Proctor/Evaluator

Expected time to complete skill(s): 15 minutes

| Criteria/Performance Steps: | | | Te | est | Ret | est |
|--|----------------|--------------------------------------|-------------|--------|----------|------|
| Safely performs the following steps: | | | Р | F | Р | F |
| Evaluates condition of hose before testing | a includina co | upling gaskets | | | | |
| 2. Wears personal protective equipment – CRITICAL POINT | | | | | | |
| Marks all couplings prior to testing | | | | | | |
| 4. Performs testing properly and according to manufacturer's guidelines – CRITICAL POINT | | | | | | |
| 5. Marks defective hoses and records resul | ts | | | | | |
| Candidate must successfully perform 4/5 steps including CRITICAL POINTS | | | | | Score:/5 | |
| Evaluator Notes | | | | | | |
| Evaluator Print Name & Signature: | Date | Overall Skill Sheet Sco | ore Fail | | | |
| | | | | | | |
| By my signature above, I verify that | | | <u> </u> | | SAC) | |
| Re-Test Evaluator Print Name & Signature | gnature: | Overall Skill Sheet Re- | | | | |
| | | Pass | Fail | | | |
| By my signature above. I verify that | l am currently | certified to the level I am tes | ting (AL/I | PR/IF9 | SAC) | |
| By my signature above, I verify that I am currently Candidate Print Name & Signature: | | Candidate: Print Name or Candidate # | | | | |
| Note to Evaluator(s): By your signature a College Evaluator, have followed AFC Testested the above skills in their entirety. | | | | | | -ire |
| Note to Student: Skill will end when you sidentified steps. Notify the evaluator at AN | | | ave com | pleted | all the | |



Process/Skill Sheet FFII - 22-1

Home Fire Safety Survey

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.5.1

Condition: The candidate, given an inspection scenario and appropriate forms, shall perform a fire safety survey of a private dwelling so that fire and life safety hazards are identified and that recommendations for corrections are made.

Scenario: Provided by Proctor/Evaluator (use provided Survey form)

Expected time to complete skill(s): 20 minutes

| Criteria/Performance Steps: | Criteria/Performance Steps: | | | Test | | test |
|---|--|-----------------------------------|-------------|--------|---------|------|
| Safely performs the following steps: | | | Р | F | Р | F |
| 1. Identifies themselves, the purpose of their visit, and requests permission to conduct survey – CRITICAL POINT | | | | | | |
| 2. Inspects ALL areas inside of dwelling for | 2. Inspects ALL areas inside of dwelling for life safety hazards | | | | | |
| 3. Makes note of smoke and carbon monoxide detectors (recommends to occupant to install if there are none) | | | | | | |
| 4. Inspects exterior of dwelling | | | | | | |
| 5. Informs dwelling occupant/owner of findir | ngs and proper | methods of correction | | | | |
| 6. Documents findings and completes all de | partment form | S | | | | |
| Candidate must successfully perform 5/6 steps including CRITICAL POINTS | | | | e:/6 | Score | e:/6 |
| Evaluator Print Name & Signature: | Evaluator | Overall Skill Sheet Sc Pass | ore Fail | | | |
| | | r ass | ı alı | _ | | |
| By my signature above, I verify that I | | | | | SAC) | |
| Re-Test Evaluator Print Name & Sig | gnature: | Overall Skill Sheet Re-Test Score | | | | |
| | | Pass | Fail | _ | | |
| By my signature above, I verify that I am currently certified to the level I am testing (AL/PB/IFSAC) | | | | | | |
| Candidate Print Name & Signature: | Candidate: Print Nam | | | | | |
| Note to Evaluator(s): By your signature above, you verify that you are qualified to serve as an Alabama Fire College Evaluator, have followed AFC Testing Policies and have witnessed that the above candidate has tested the above skills in their entirety. | | | | | | |
| Note to Student: Skill will end when you sidentified steps. Notify the evaluator at AN | | | ave com | pleted | all the | , |

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Home Fire Safety Survey

| | 1. (| Genera | l Inform | nation: |
|--|------|--------|----------|---------|
|--|------|--------|----------|---------|

| Survey Completed By: | Date: | | | Time: |
|---------------------------------------|----------|------|------|--------------------|
| | | | | |
| Occupant Name: | Address: | | | Phone: |
| | | | | |
| Occupant Owner of Property: | Occupant | | | Construction Type: |
| □ YES □ NO | ☐ YES | □ NO | | |
| | | | | |
| . Exterior Survey: | Yes | No | N/A | Comments: |
| Multifamily dwelling | | | | |
| Address numbers clearly visible | | | | |
| FD access unobstructed | | | | |
| 3' hydrant clearance maintained | | | | |
| Windows/doors can be properly secured | | | | |
| Security measures present | | | | + |
| (window bars, etc.) | | | | |
| Utility service (gas, water, | | | | |
| electrical) properly maintained | | | | |
| | | | | |
| II. Interior Survey: | Yes | No | N/A | Comments: |
| ii. Interior Survey. | 163 | 140 | IV/A | Comments. |
| Good housekeeping maintained | | | | |
| Exits unobstructed | | | | |
| At least 30" clearance maintained | | | | |
| in front of electrical panels | | | | |
| Extension cords used for | | | | |
| temporary purposes only | | | | |
| Extension/appliance cords frayed | | | | |
| or ungrounded | | | | |
| Surge suppressors used | | | | |
| Drywall free of large | | | | |
| holes/damage | | | | |
| Fire extinguishers available/in | | | | |
| | | | | 1 |

| rocess | Sheet | FFII | -22-1 |
|--------|-------|-------------|-------|
|--------|-------|-------------|-------|

| Smoke detectors | | | | |
|---------------------------------|--|--|------|--|
| present/operable | | | | |
| Carbon monoxide detectors | | | | |
| present/operable | | | | |
| Fire alarm system monitored | | | | |
| Fire sprinkler system inspected | | | | |
| Hazardous materials (cleaning | | | | |
| supplies, paint, etc.) properly | | | | |
| stored | | | | |
| Emergency contact numbers | | | | |
| posted | | | | |
| | | | | |
| | | | | |
| Signature | | | Date | |



Process/Skill Sheet FFII - 22-2

Fire & Life Safety Education

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.5.2

Condition: The candidate, given prepared fire and life safety education materials, shall make a presentation to a small group of people.

Scenario: Provided by Proctor/Evaluator (Use provided presentation outlines)

Expected time to complete skill(s): 20 minutes

| Criteria/Performance Steps: | | | Te | est | Ret | est |
|---|-----------------------------|--|-------------|--------|---------|------|
| Safely performs the following steps: | | | Р | F | Р | F |
| 1. Identifies themselves and the purpose of | the presentati | ion | | | | |
| 2. Presents topic and demonstrates skills (setc) | ls | | | | | |
| 3. Ensures participants practice under supe | | | | | | |
| 4. Presents information accurately and ans | wers or refers | all questions | | | | |
| 5. Documents presentations | | | | | | |
| Candidate must successfully perform 4/ | <mark>5</mark> steps includ | ding CRITICAL POINTS | Score | e:/5 | Score | e:/5 |
| | Evaluator | Notes | • | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Evaluator Print Name & | Date | Overall Skill Sheet Sc | ore | | | |
| Signature: | | Pass | Fail | | | |
| Dy my signature above I verify that | l am aurranth | contified to the level Lam to | oting (AI / | DD/IE | 240) | |
| By my signature above, I verify that Re-Test Evaluator Print Name & Signature | - | | | | SAC) | |
| The rest Evaluator Fillit Name & Sign | griature. | Overall Skill Sheet Re-Test Score Pass Fail | | | | |
| | | 1 400 | 1 uii | - | | |
| By my signature above, I verify that I am currently certified to the level I am testing (AL/PB/IFSAC) | | | | | | |
| Candidate Print Name & Signature: | | Candidate: Print Name or Candidate # | | | | |
| | | | | | | |
| Note to Evaluator(s): By your signature a | | | | | | Fire |
| College Evaluator, have followed AFC Testested the above skills in their entirety. | ting Policies a | nd have witnessed that the | above ca | ndidat | e has | |
| Note to Student: Skill will end when you | | | have com | pleted | all the | ; |
| identified steps. Notify the evaluator at AN | Y time that you | u have a safety concern. | | | | |



Fire and Life Safety Education

(Return completed from with Process/Skill Sheet 22-2)

Candidate/Audience Information:

| Name: | Date: | Location of Presentation: | | | | |
|---|---------------------------------|---------------------------------|--|--|--|--|
| | | ☐ School ☐ Fire Station | | | | |
| | | ☐ Other | | | | |
| Target Audience Age Group: | Topic Presented: | Additional Props/Aids Required: | | | | |
| ☐ Preschool ☐ Early Elementary | ☐ Dialing 911 ☐ Stop/Drop/Roll | | | | | |
| ☐ Older Elementary ☐ Jr/Sr High | ☐ Exit Drills ☐ Basic First Aid | | | | | |
| ☐ Other | | | | | | |
| Choose one of the Following Presentation Outlines: | | | | | | |
| Choose one of the Following Presento | ation Outlines: | | | | | |
| Choose one of the Following Presento | ation Outlines: DIALING 911 | | | | | |
| Choose one of the Following Presento 1. What is 911? | | | | | | |

- 3. What will the operator ask and how to respond?
- 4. Who is coming to help?
- 5. Importance of knowing addresses

STOP, DROP, AND ROLL

- 1. How to avoid fire
- 2. What to do if you come in contact with flames
- 3. Stop- don't run and provide oxygen to the fire
- 4. Drop- get down as quickly as possible
- 5. Roll- smother the flames
- 6. Cover face
- 7. Calling 911

EXIT DRILLS

- 1. When to exit the home
- 2. Staying low to avoid smoke
- 3. Leaving pets/toys behind
- 4. Have a meeting place outside the home
- 5. Calling 911

BASIC FIRST AID (Jr/Sr High Students and Older Only)

- 1. Recognizing signs/symptoms of distress
- 2. Calling 911
- 3. ABC's
- 4. Hands only CPR
- 5. AED usage
- 6. Stop bleeding- pressure and tourniquets



Process/Skill Sheet FFII - 22-3

Pre-Incident Survey

NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2019 Edition, 5.5.3

Condition: The candidate, given access to a building and given the necessary supplies such as note paper, pencils, rulers, and graph paper, shall prepare a pre-incident survey (use provided form).

Scenario: Provided by Proctor/Evaluator; Facility Specific (Example: complete supplied form using the facility at your location)

Expected time to complete skill(s): 20 minutes

| Criteria/Performance Steps: | | | Т | est | Ret | est |
|---|-----------------|--------------------------------|-----------|--------|-------|------|
| Safely performs the following steps: | | | Р | F | Р | F |
| 1. Records all ownership data that is pertine | ent to building | | | | | |
| 2. Identifies components of utilities, hydrani and notes their locations | S | | | | | |
| 3. Notes any hazards that are present (hazardous materials, obstructions to property, obstructions for egress for occupants) | | | | | | |
| 4. Completes accurate sketch of building using common symbols and indicating all necessary information | | | | | | |
| 5. Informs building occupant/owner of findir | ngs | | | | | |
| 6. Completes all related departmental forms | S | | | | | |
| Candidate must successfully perform 5/6 steps including CRITICAL POINTS | | | | | Score | e:/6 |
| | | | | | | |
| Evaluator Print Name & | Date | Overall Skill Sheet So | ore | | | |
| Signature: | | Pass | Fail | _ | | |
| By my signature above, I verify that | am currently | certified to the level I am te | sting (AL | /PB/IF | SAC) | |
| Re-Test Evaluator Print Name & Signature | gnature: | Overall Skill Sheet Re | | | | |
| | | Pass | Fail | ail | | |
| By my signature above, I verify that I am currently certified to the level I am testing (AL/PB/IFSAC) | | | | | | |
| Candidate Print Name & Signature: | | Candidate: Print Nan | ne or Ca | andida | ate# | |
| Note to Evaluator(s): By your signature above, you verify that you are qualified to serve as an Alabama Fire College Evaluator, have followed AFC Testing Policies and have witnessed that the above candidate has tested the above skills in their entirety. | | | | | | |
| Note to Student: Skill will end when you state or indicate to the evaluator that you have completed all the identified steps. Notify the evaluator at ANY time that you have a safety concern. | | | | | | |

Page 1 of 1



Pre-Incident Survey

| I. General | Informat | ion: |
|------------|----------|------|
| | | |

| (Retu | rn form with | completed | skill sheet FF | II - 22-3) |
|---|--------------------|-----------|----------------|-------------------|
| I. General Information: | | | | |
| Survey Completed By: | Date: | | | Name of Business: |
| Address: | Contact: | | | Phone: |
| Estimated Size of Building (sq. ft): | Number of Stories: | | | Occupancy/Use: |
| II. Life Safety: | Yes | No | N/A | Comments: |
| Exit corridors/hallways clear of obstructions | | | | |
| Exit doors operating properly | | | | |
| Illumination of exits adequate | | | | |
| Exit door signs provided | | | | |
| Emergency lighting maintained | | | | |
| | | | | |
| III. Fire Suppression: | Yes | No | N/A | Comments: |
| Standpipe hose cabinet accessible and in good condition | | | | |
| Caps provided for hose connections | | | | |
| Sprinkler system provides full coverage | | | | |
| Sprinkler control valves open and supervised | | | | |
| Ailse or access to sprinkler valves provided | | | | |
| Sprinkler heads free of dirt, paint, or obstructions | | | | |
| Storage is minimum of 18" below sprinkler heads | | | | |
| Automatic sprinkler system inspected annually DATE: | | | | |

| Fire department connection visible | | | | | |
|--|----------|----|-----|-----------|--|
| and accessible | | | | | |
| Fire department connection | | | | | |
| capped | | | | | |
| Extinguishers accessible and | | | | | |
| properly mounted | ļ | | | | |
| Extinguishers are inspected and serviced annually DATE: | | | | | |
| Premise indentification | | | | | |
| (4" visible from road) | | | | | |
| | | | | | |
| Hydrant locations noted | <u> </u> | | | | |
| IV. Fire Alarm/Detection System: | Yes | No | N/A | Comments: | |
| Alarm system inspected and tested annually DATE: | | | | | |
| | <u> </u> | | | | |
| Smoke detectors in place and | | | | | |
| operational | | | + | | |
| Enunciator panel location noted | | | | | |
| | | | | | |
| V. Common Fire Hazards: | Yes | No | N/A | Comments: | |
| Junction boxes and receptacle | | | | | |
| outlets covered | | | | | |
| Permanent wiring used | | | | | |
| throughout | | | | | |
| Electrical equipment appears to be in good working order | | | | | |
| Proper clearance between heating | | | | | |
| unit(s) and combustibles | | | | | |
| Facility maintains good | | | | | |
| housekeeping, including exterior | | | | | |
| Fire extension avenues are | | | | | |
| covered properly (holes in walls or | | | | | |
| ceiling) | | | | | |
| ceg/ | | | | | |
| | | | | | |
| VI. Special Hazards: | Yes | No | N/A | Comments: | |
| Storage of | | | | | |
| flammable/combustible liquids | | | | | |
| Storage of compressed gases | | | | | |
| Compressed gas containers | | | | | |
| properly marked/secured | | | | | |
| Storage of hazardous chemicals | | | | | |
| Rack/high pile storage | | | | | |
| Commercial cooking operations | | | | | |
| Hood and fire suppression system | | | | | |
| provided DATE: | | | | | |
| Other special hazards | | | | | |
| | | | | | |

| IV. Additional remarks/comments: | |
|----------------------------------|------|
| | |
| | |
| | |
| | |
| Signature | Date |

Complete a sketch of the facility including utility, hydrant, and special hazard locations.

