**HAZ-CO FIRE TRAINING ACADEMY- Bill Palya, Coordinator**

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*P. O. Box 3063, SHERMAN, TX 75091  Phone: 903-564-3862. Fax: 903-564-3017*

**STUDENT APPLICATION**

**Choose:  DAY CLASS or NIGHT CLASS  (PLEASE CIRCLE ONE)**

**NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_D.O.B.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_AGE\_\_\_\_\_\_\_\_
                                Last                First                M.I.

                SOC.SEC.#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SEX  (CIRCLE ONE)  MALE  FEMALE

                HEIGHT\_\_\_\_\_\_\_\_\_\_\_WEIGHT\_\_\_\_\_\_\_\_\_\_\_HOME PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
**(AREA CODE)**
**HOME ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CITY\_\_\_\_\_\_\_\_\_\_\_\_ST\_\_\_\_\_\_\_ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_

                CURRENT EMPLOYER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_WORK PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                CELL PHONE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_EMAIL ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                EDUCATION: CIRCLE THE HIGHEST LEVEL ACHIEVED**

**A. G.E.D.                                                              D. COLLEGE-BA
                        B. HIGH SCHOOL                                                 E. COLLEGE-MASTER
                        C. COLLEGE-ASSOC.                                            F. COLLEGE-DOCTORATE**

**HAVE YOU HAD ANY FIRE TRAINING BEFORE?  EXPLAIN**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                DO YOU HAVE A CURRENT AMERICAN HEART ASSOCIATION CARD?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                WHERE DID YOU HEAR ABOUT HAZ-CO FIRE ACADEMY?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                HAVE YOU APPLIED TO OTHER FIRE ACADEMIES?              (CIRCLE ONE)   YES    NO

                IF YES, WHERE?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                BY THE FIRST DAY OF CLASS, YOU MUST PROVIDE US WITH A COPY OF A MEDICAL PHYSICAL
               AND PULMONARY TEST.**

***ALL TUITION IS DUE BY THE FIRST DAY OF REGISTRATION*.**

**CLASS IS LIMITED TO 25 STUDENTS.  A DEPOSIT OF $500.00 PRIOR TO REGISTRATION WILL SECURE ONE
        OF THE FIRST 25 SPOTS.  ALL OTHERS WILL BE FIRST COME, FIRST SERVE.

        SIGNATURE OF APPLICANT  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_              DATE  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

        T shirt size:   S   M   L   XL   2XL  (circle one)**