



### Application and Registration Procedures

1. New students must file an application to become a COM student at <http://www.com.edu/apply>.
2. Students may file for financial aid at <http://www.com.edu/financial-aid>, veteran's benefits at <http://www.com.edu/veterans>, and scholarships at <http://www.com.edu/scholarships>.

**Note:** There are deadlines for filing these applications, which are listed on the applicable web site. **Prospective cadets are advised to complete these applications as early as possible.**

3. Complete the Fire Academy application and obtain a sports type physical. The forms may be obtained from the administrative assistants at the Public Service Careers (PSC) building at 1205 Amburn Rd., Texas City, TX 77591 or downloaded from the links at the bottom of Fire Academy web site at <http://www.com.edu/academics/fire-technology/academy>.
4. Turn the application, physical, and copies of the documents listed on the cover page to the Administrative Assistants at the PSC. **Note:** The forms should be turned in no later than the end of July for the fall semester and prior to the Christmas break in December for the spring semester.
5. Orientation, interviews, and registration will be conducted at the PSC building the week prior to the beginning of the Academy. **Orientation dates will be listed in the [Announcements](#) section of the Fire Technology web site.**
6. After orientation, students accepted into the Academy will receive a registration form that allows them to register at Admissions on the main campus. Tuition and fees must be paid at the time of registration unless a payment plans has been arranged. If a student has obtained financial aid or a scholarship, verification will be required. **After registration, provide a copy of the payment receipt to the Administrative Assistants at the PSC building.**

For additional information, contact the Director of Fire Technology, Danny McLerran at 409-933-8378, [dmclerran@com.edu](mailto:dmclerran@com.edu) or the Administrative Assistants at 409-933-8285 or 8224.



Day Academy \_\_\_\_\_ Night Academy \_\_\_\_\_ Semester \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Physical Address City, Texas Zip Code

Primary Contact No. \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Secondary Contact \_\_\_\_\_ Contact No. \_\_\_\_\_

Date Contacted

Comments

- 1.
- 2.

**Required Documentation**

- \_\_\_\_\_ Fire Academy Application
- \_\_\_\_\_ Copy Driver's License
- \_\_\_\_\_ Copy Social Security Card
- \_\_\_\_\_ Copy High School Diploma/GED
- \_\_\_\_\_ Physical Examination with Proof of Meningitis Vaccination
- \_\_\_\_\_ Verification of Attendance to Fire Academy Orientation
- \_\_\_\_\_ Copy of Registration Payment Receipt/Financial Aid Letter



**Fire Academy Application:**  Fall Day  Fall/Spring Night  Spring Day

**Personal Data:** Print legibly or type.

|            |      |   |
|------------|------|---|
| First Name | Last | M |
|------------|------|---|

| Social Security No. | Driver's License No. | State |
|---------------------|----------------------|-------|
|                     |                      |       |

**Address**

|                             |             |            |
|-----------------------------|-------------|------------|
| Street/Apt. #               |             |            |
| City                        | ST          | Zip Code   |
| Home Phone:                 | Cell Phone: |            |
| Emergency Contact, Relation | Cell Phone  | Home Phone |

**Education Background** (Highest Level Completed)  GED  HS  College

|                        |                                |
|------------------------|--------------------------------|
| Name of School/College | Date Graduated/Years Completed |
|------------------------|--------------------------------|

**Technical Training**

|      |                |               |
|------|----------------|---------------|
| Name | Date Graduated | Certification |
|------|----------------|---------------|

**Military Service**

|        |               |           |                |
|--------|---------------|-----------|----------------|
| Branch | Service Dates | Specialty | Discharge Type |
|--------|---------------|-----------|----------------|

**Employment Background (Latest Employment)**

|                   |                     |
|-------------------|---------------------|
| Employer/Location | Dates of Employment |
| Duties            | Salary              |

**Additional Information:**

|  |
|--|
| Do you have any experience as a firefighter trainee or career or volunteer firefighter?<br><input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, explain.)   |
| Firefighter training requires strenuous physical activities? Are you able to perform such activities?<br><input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please explain)  |
| Firefighter training requires entering environments of intense heat and limited visibility? Are you able to do so?<br><input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please explain)   |
| Firefighter training requires entering confined spaces? Are you able to do so?<br><input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please explain)   |
| Firefighter training requires climbing ladders up to 100' length? Are you able to do so?<br><input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please explain)   |
| <b>Rules and Regulations:</b> The Fire Academy is conducted in a manner similar to typical fire department training academies, i.e. as a paramilitary organization. Do you agree to comply with all rules and regulations of the Academy and directives issued by instructors and the Director?<br><input type="checkbox"/> Yes Initial _____  |
| <b>Medical Treatment:</b> During firefighter training, injuries may occur. You are financially responsible for the cost of medical treatment that may be needed during the Academy? Do you understand your responsibility regarding medical treatment?<br><input type="checkbox"/> Yes Initial _____   |
| <b>Recognized Emergency Medical Course:</b> To be eligible for Basic Fire Suppression certification, the TCFP requires completion a recognized emergency medical course, TCFP Standards Manual, Rule §423.1(c). <b>Note:</b> The Texas Department of State Health Services performs criminal background checks, which could deny certification. It is your responsibility to resolve any criminal background matters with the TDSHS directly. Do you understand your responsibility regarding medical certification requirements and criminal background checks?<br><input type="checkbox"/> Yes Initial _____ |
| <b>Criminal Background Check:</b> The Texas Commission on Fire Protection performs criminal background checks on all applicants, which could deny certification. It is your responsibility to review the TCFP's Standards Manual, Chapter 403, Criminal Conviction and Eligibility for Certification and resolve criminal background matters with the TCFP directly. Do you understand your responsibility regarding criminal matters?<br><input type="checkbox"/> Yes Initial _____   |

**APPLICANT'S STATEMENT:** I certify that the above answers are true and complete.

Applicant's Printed Name \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Return this completed application with the required documents to the Administrative Assistants at the Public Service Careers building across from the main campus on Amburn Rd.

For additional information, contact the Director of Fire Technology, Danny McLerran at 409-933-8378 or the Administrative Assistants at 409-933-8285 or 8224.