



REQUEST FOR FIRE TRAINING OFFSITE LOCATION



CHARTER INSTITUTION			CHARTER #	
ADDRESS				
CITY		STATE	ZIP	COUNTY
Offsite request pertains to the following training levels. (Check all that apply)				
<input type="checkbox"/> Volunteer Firefighter		<input type="checkbox"/> Firefighter I		<input type="checkbox"/> Firefighter II
<input type="checkbox"/> Fire Instructor		<input type="checkbox"/> Assistant Fire Instructor		<input type="checkbox"/> Fire Safety Inspector Instructor
DESCRIBE TRAINING TO BE CONDUCTED OFFSITE				

OFFSITE ORGANIZATION				
ADDRESS				
CITY		STATE	ZIP	COUNTY
CONTACT NAME				
TELEPHONE		EMAIL		

Pursuant to 4765-11-17 of the Ohio Administrative Code (O.A.C.), a fire chartered training program may offer courses at locations different from the location listed in the original application provided that all of the following apply.

- The chartered program continues to operate at the location identified in the application for a charter;
- Each offsite location where the program is offered meets the minimum standards for chartering as set forth in O.A.C. rule 4765-11-03;
- The chartered program submits a written request to the executive director;
- Files and records of students enrolled in a fire training course conducted offsite may be maintained in a secure area at the offsite location until the course is completed, at which time all student files and records shall be maintained at the site of the chartered institution. The records shall be surrendered to the chartered program no later than ninety days after the final day of the course;
- The chartered program shall maintain a current and valid charter in order to offer courses at an offsite location;
- If a chartered program is under disciplinary action by the executive director, such institution shall obtain approval from the executive director before offering courses at a new offsite location;
- If a chartered program is utilizing a location outside of the state of Ohio, the chartered program shall comply with O.A.C. chapter 4765-11 and any applicable law, rules, or regulations in that state.

As the authorized program director I attest that the offsite location listed above meets all the standards for a chartered training program set forth in O.A.C. 4765-11.

NAME OF PROGRAM DIRECTOR (PRINTED)	
SIGNATURE OF PROGRAM DIRECTOR	DATE
X	

SUBMIT TO: Fire Education Coordinator
 Department of Public Safety
 Division of Emergency Medical Services
 P.O. Box 182073
 Columbus, Ohio 43218-2073

FAX: (614) 466-9461 **EMAIL:** FireEducation@dps.ohio.gov