



Application for Certification



Candidate Name: _____	
Address: _____	Initial attempt <input type="checkbox"/>
Phone Number: _____	Retest <input type="checkbox"/>
Email address: _____	Written <input type="checkbox"/>
Last 4 digits of SSN*: _____	Practical <input type="checkbox"/>
	Both <input type="checkbox"/>

What certification are you applying for? (check all that apply)		
NFPA 1006 Rope Rescue	Level 1 <input type="checkbox"/>	Level 2 <input type="checkbox"/>
NFPA 1006 Confined Space Rescue	Level 1 <input type="checkbox"/>	Level 2 <input type="checkbox"/>
NFPA 1006 Trench Rescue	Level 1 <input type="checkbox"/>	Level 2 <input type="checkbox"/>
NFPA 1006 Structural Collapse Rescue	Level 1 <input type="checkbox"/>	Level 2 <input type="checkbox"/>

If the candidate is being sent by an agency (fire department, military, etc.) fill out this section

Agency : _____

Supervisor Name: _____

Agency Address: _____

Phone Number: _____ **Email:** _____

Candidate certification records will not be release to anyone without permission from the candidate. If the candidates sponsoring/sending agency requires that the REACT Center send certification results to the sponsoring/sending agency, then the candidate must sign the following release of records authorization:

"I authorize the REACT Center Certification Program to release my certification records/status to my supervisor or his/her designee"

Candidate Signature: _____ Date: _____

Payment Info

Please submit a check for payment in the amount of \$125.00 per Rope and Confined Space certification, and \$200 per Trench and Structural Collapse certification with this application.

* The Pro Board collects these numbers for tracking purposes only. Information in the National Registry is not sold, bartered, rented or otherwise distributed or shared.