



Public Fire Educator 1

- Name: _____
 - Certification expiration date _____
 - Your Department: _____ Your Supervising Officer: _____
 - Complete a renewal bubble sheet. FDID affiliation # is 00001. Renewal for Public Fire Educator I is 19. Use your home address. Don't forget to sign your name on the front page.
 - Include a letter from your department supervisor that you are currently and will continue to act in this role for your department.
 - Bring to HCTC this **checklist**, **the letter** and **a completed bubble sheet**.
- ! Renewals will not be processed until all these forms are complete and together. DO NOT HAND IN PARTIALLY COMPLETE RENEWALS. THEY WILL BE DISCARDED.