Fall and Spring Academy

Oxnard College holds two Regional Fire Academies per year:

- The fall academy begins the first day of the semester. Classes are held Monday thru Thursday beginning at 0700 and ending at 1700. This is a 16 week class that graduates mid-December.

- The spring academy begins the first day of the semester. Classes are held Monday thru Thursday beginning at 0700 and ending at 1700. This is a 16 week class that graduates near the end of April.

Upon graduating, cadets will receive CSFM and NWCG certifications. For a complete list of certifications go to:

http://www.oxnardcollege.edu/departments/academic/fire-technology/fire-academy/fire-academy-certifications

Prerequisites:

The following courses/requirements are prerequisites: completion required prior to application.

- **EMT R169 - Emergency Medical Technician - Certified (National Registry or State/Local EMSAC Card) NO EXCEPTIONS - MUST BE A CERTIFIED EMT AT TIME OF APPLICATION.**

- **FT R151 - Fire Protection Organization** - Successful completion (C or better) (Academic Policies) **MUST BE COMPLETED AT TIME OF APPLICATION.**

GOOD PHYSICAL CONDITION IS NECESSARY TO COMPLETE THIS COURSE. IT IS MANDATORY THAT YOU CONSULT YOUR PHYSICIAN (Form is attached).

Contacts:

- **Captain Tamara Crudo,** 805-384-8104
  **Fire Academy Instructor/Coordinator**

- **Gail Warner,** 805-384-8102
  **Regular semester hours/dates Director, Fire Technology/Fire Academy/EMT**
ACCEPTANCE GUIDELINES

There are 40 seats open each semester for the academy. The 40 cadets are chosen based on a point system. The point system is as follows:

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<tr>
<th>Licensed Exp Work</th>
<th>AA/AS/AAS</th>
<th>FT</th>
<th>FT</th>
<th>FT</th>
<th>FT</th>
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<th>AA/AS/AAS</th>
<th>BA/BS</th>
</tr>
</thead>
<tbody>
<tr>
<td>EMT-P Emer Resp</td>
<td>non FTech</td>
<td>161</td>
<td>152</td>
<td>154</td>
<td>155</td>
<td>158</td>
<td>167 FTech</td>
<td></td>
</tr>
</tbody>
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Recommendation Letter From the Ventura County Fire Chief, LC City Fire Chief, SB City Fire Chief, Oxnard City Fire Chief, Montecito Fire Chief, Ventura City Fire Chief.

1 point 1 pt per yr 3 points 1 pt 1 pt 1 pt 1 pt 1 pt 1 pt 10 points 5 pts 5 pts

You may NOT count 10 points for 2 year degree AND points for course completion.

Satisfactory completion is a grade of “C” or better. (See college catalogue, Academic Policies).

Recommendation Letters must come from one of the following Chiefs:

- Chief Lorenzen, VFCD
- Chief Endaya, Ventura FD
- Chief Windsor, Oxnard FD
- Chief Araiza, Santa Paula FD
- Chief Landeros, Fillmore FD
- Chief Hickman, Montecito FD
- Chief Terrazas, LA City FD
- Chief EcElroy, SBFD

Your placement in the Academy will be determined upon review of your application and support documents. All support documents must be in your application package for you to be considered for the Academy. Incomplete applications will NOT be considered.

IMPORTANT:

No application will be accepted prior to the application period noted on the web site.

- APPLICATIONS MUST BE SUBMITTED AND RECEIVED BY THE LAST DAY OF FILING (open period) BY 1500 (3pm). POSTMARKS WILL NOT BE ACCEPTED AS A RECEIVE DATE.

- See “Apply to the Fire Academy” page on the college web site for dates that applications will be accepted
  [http://www.oxnardcollege.edu/departments/academic/fire-technology/fire-academy/apply-to-the-fire-academy](http://www.oxnardcollege.edu/departments/academic/fire-technology/fire-academy/apply-to-the-fire-academy)
Physician Clearance Form – All medical forms must be attached

Student Name _____________________________________________ Date _______________

The Oxnard College Basic Firefighter Academy requires an individual to participate in activities which requires the moving, lifting and maneuvering of heavy equipment, such as ladders, bundles of hose, and other skills related to performing the functions of a firefighter.

This is to certify that the above named student is medically clear to participate in the following physical requirements of the Oxnard College Fire Academy.

1. Cadence marching and drilling
2. Lift objects weighing a minimum of 50 lbs. from the ground to a minimum of shoulder height.
3. Participate in a physical fitness program including cardiovascular efficiency and endurance exercise while wearing protective gear which can weigh 50lbs. (Running and circuit training)
4. Participate in exercise and activities requiring eye-hand coordination, leg strength and coordination, grip strength, arm and upper body strength, shoulder strength and correct body weight distribution.
5. Maneuver, balance and climb ladders while wearing protective clothing (50 lbs.)
6. Lift, pull and maneuver charged and uncharged hose lines.
7. Perform in situations requiring the use of a self-contained breathing apparatus (30-40 lbs.) (standing and crawling).
8. Climb in and out of and up and down on fire apparatus.
9. Cardio-vascular efficiency. EKG Normal___________ Abnormal_______________
   Lung function test results must be attached. Required for self-contained breathing apparatus mask fit testing.
11. Vital signs within normal limits. Yes ______ No ______ Concerns_____________________
    a. BP ________ Pulse ________ Resp___________
12. Musculoskeletal concerns Yes _____ No _____ Explain ____________________________

Physician’s signature _______________________________________________ Date __________

Physicians name _____________________________ ID/Lic # ________________________
   (please print)

I agree ☐ or disagree ☐ that this candidate is physically capable of performing the above tasks. Additional sheets may be attached if needed or required.
Additional Medical Instructions (Cadet and Physician)

Fire Departments follow the National Fire Protection Association (NFPA) 1582 Standard on Comprehensive Medical Program for Fire Departments. This includes firefighter candidates and current employees. You must pass this strict medical physical prior to getting hired in the fire service. We are not an employer; therefore we do not follow the strict guidelines of 1582. However, we follow strict physical fitness standards and PT is a required element of the fire academy as well as the requirements listed on the previous page. The fire academy is a very physically demanding course. It is extremely important that you disclose any injuries or illnesses that you have or have had. Our goal is to keep you safe as well as the safety of the other students. Your medical history is an important aspect of firefighting physical ability.

Medical History Questionnaire

Name: ___________________________ Date: __________________

Do you have any medical condition, existing injury, or are you taking any medications for a chronic health problem that will affect your total participation in the Fire Academy?

☐ Yes  ☐ No  If yes, please explain

_____________________________________________________________________________________

_____________________________________________________________________________________

Have you ever had: Explain any yes answers.

1. A cough or shortness of breath on moderate exertion? 
   Yes _______  No ________

_____________________________________________________________________________________

2. Hay fever, Asthma, Eczema, or other allergic reactions including medications? 
   Yes _____ No _____

_____________________________________________________________________________________

3. An operation/surgery? 
   Yes _____ No _____

_____________________________________________________________________________________

4. An injury that would limit body movement or affect your ability to lift or move patients or heavy equipment? (saws, ladders, wood, own body weight, mannequins, tarps, extrication tools, etc.)
   Yes _______ No ______

_____________________________________________________________________________________

5. Do you routinely or currently take any drugs or medications? 
   Yes _______ No ______

_____________________________________________________________________________________

6. Tuberculosis? 
   Yes _________ No __________

7. Heart Disease
   Yes __________ No __________

8. Colorblind
   Yes __________ No __________

9. Inner ear problems (balance and hearing)
   Yes _______ No ______
Application for Admission
For the _______________ Semester of 20_________

NOTE: This application will be our first impression of you. Make it good!

Name: ________________________________ DOB: __________________

Address: ___________________________________________________________

City: ____________________ State: ________ Zip: ______________

Phone: (H)_______________  (C) _______________ (Please indicate the best number to reach you).

Will you complete a Fire Tech Degree before the start of this academy? ______

If yes, from which College/University? __________________________________

Education:

School (HS)___________________________ Yr. Graduated ______________

School ____________________________ Yr. Grad___________ Units Complete ______

School ____________________________ Yr. Grad___________ Units Complete ______

School ____________________________ Yr. Grad___________ Units Complete ______

Fire Technology Courses: Please list Fire Tech courses you have satisfactorily completed. (Grade “C” or better)

School ____________________________ Course ______________________________ Units _____

School ____________________________ Course ______________________________ Units _____
OXNARD COLLEGE REGIONAL FIRE ACADEMY

School ____________________ Course ______________________________ Units _____
School ____________________ Course ______________________________ Units _____
School ____________________ Course ______________________________ Units _____
School ____________________ Course ______________________________ Units _____

❖ NOTE: Unofficial college transcripts must be provided with this application. Proof of earning a college degree and/or classes passed with a “C” or higher must be shown on your unofficial transcripts to receive credit. If you are claiming points for a degree, the degree earned must be noted on your transcripts.

EMT Certification: Please provide training date, place and expiration.

Training location __________________ State ____ Expiration Date __________

Military Service:

Branch ___________________________ Discharge Type ________________

Tell Us About You

Please answer the following questions on a separate sheet of paper. The information you provide will help us balance experience levels within academy companies.

1. Why do you think you would be the perfect cadet for the Oxnard College Fire Academy?
2. Describe your personal fitness level.
3. Describe a time when you have displayed leadership, mechanical, and/or problem solving skills.
4. What are your outstanding strengths?
5. What are your greatest weaknesses?
6. What is your greatest accomplishment thus far?
**Application Checklist**

**Required Forms:**

- Physician Clearance Form – *Must be completed and signed by a physician.*
- Additional Medical Instructions
- Application for Admission – *(2 pages)*

**Required Attachments:**

- Lung function test results *(plus any additional medical forms)*
- Unofficial College Transcripts – *must show degree earned for degree earned points*
- Tell Me About You answer sheet
- Resume
- Driver’s License or ID (copy)
- Copy of EMT Certification Card with Expiration Date (copy)

**Optional Attachment:**

- Fire Chief recommendation

All required forms and attachments must be completed when the Application for Admission is submitted. Applications **WILL NOT** be accepted without all documentation. It is your responsibility to double check your packet for completeness. You **WILL NOT** be contacted to provide forgotten or incorrect information. This application will not be returned or retained.

**Hand Deliver (Recommended) or Mail your application packet to:**

Oxnard College Fire Academy Offices
Attn: Gail Warner, Director
104 Durley Avenue
Camarillo, CA 93010

Or,

You may fax your application to:

(805) 484-1651 (not recommended)

Oxnard College does not discriminate against any person in any of its programs because of race, color, religion, sex, national origin, age, disability, status as a Vietnam-era veteran or marital status.