Mississippi Fire Personnel Minimum Standards and Certification Board Personnel Action Form

A **Personnel Action Form** must be completed for employee new hire information and for volunteer fire fighters taking the CPAT and Mississippi NFPA 1001-I/II Certification Program. Complete <u>ALL</u> information below and forward to the MSCB Office within thirty (30) days. **NOTE: Please attach copies of all NFPA 1001 certifications to the Personnel Action Form.**

Social Security Number (Last 4 digits required)				Today's Date:			
Career Fire Fighter				Volunteer Fire Fighter			
Date of Current Employment:				Date of Entry:			
Full Time or Part Time Status:							
Employee's First Name		M.I.	Last Nan	ast Name		Date of Birth	
Street Address:							
City:	ity: State:			Zip Code:		Phone Number:	
Fire Department Name & Fire Chief/Director Does the employee possess an	n NFPA 1001	- I & II ce	ertification?		No	rtment Fax Number	
Is the certification from in-state or out-of-state? Is the certification IFSAC, Pro Board, or MSCB?				 () In-State () Out-of-State () IFSAC () Pro Board () MSCB () None 			
Fire Department (Career a Dept. Name/Address/Phon Has the employee been separa 1. Under two (2) ye 2. Two (2) to Five (3. Over (5) years?	ated from the ars? (5) years? (Contact/ Fire Serv) Yes (Dates of En ice?) No) No		ecessary)		
(Signature of Fire Chief/Director or Designee)				Date			

WARNING: Mississippi Code as Annotated 97-7-10 Fraudulent statements and representations provide for severe penalties from misrepresentation or fraudulent statements to a board. This statute authorizes a fine of up to ten thousand dollars (\$10,000) and a jail sentence of up to five (5) years.

Mississippi Code 1972 as Annotated §45-11-253 empowers the Board to require the submission of reports and information by fire service agencies for the administration of §45-11-251 and §45-11-253.

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