NAME: ____________________________________      DATE: ___________________

EVALUATOR: ______________________________

The following procedures and evolutions must be performed by the student to the satisfaction of the evaluator.

Locate and describe the use of the following equipment: Evaluator Check Off________

PICK HEAD AXE
ALL HANDLIGHTS
ALL SPANNER WRENCHES
DRY CHEMICAL EXTINGUISHER
ALL LADDERS (total number & length of each)

Don the following pieces of protective clothing:                Evaluator check Off________

HELMET (chinstrap, ear flaps, safety shield)
COAT (snaps, buckles collar)
BUNKER PANTS & BOOTS (snaps, buckles)
GLOVES(approved firefighter gloves)
DESCRIBE ALL PARTS OF AN S.C.B.A.

Don SCBA:            Evaluator Check Off________

BOTTLE TURNED ON
ALL STRAPS TIGHTENED AND WAIST BELT BUCKLED
CHECKED SEAL ON FACEPIECE
OPERATES BYPASS VALVE

VENTILATION:           Evaluator Check Off________

PLACE A MECHANICAL OR GASOLINE FAN IN SERVICE TO PERFORM POSITIVE PRESSURE VENTILATION.
FAN PLACED IN PROPER LOCATION
KNOWLEDGE OF STARTING FAN OR OBTAINING POWER
ENTRY:        Evaluator Check Off__________

SIMULATE ENTRY THROUGH A WOODEN OR METAL DOOR
SELECTED PROPER ENTRY TOOL
SIMULATED HOW ENTRY WOULD BE PERFORMED

HYDRANT HOOK-UP (where applicable): Evaluator Check Off__________

DESCRIBE HOW TO HOOK UP TO HYDRANT
DESCRIBE HOW TO LAY DUAL LINES
DESCRIBE HPW TO LAY A SPLIT LAY
HOSE: EVALUATOR CHECKOFF
PROPERLY COUPLE TWO(2) SECTIONS OF HOSE (higbee-cut)
PROPERLY UNCOUPLE HOSE (Spanners, 2 F/F method
(DOT) EMERGENCY RESPONSE GUIDEBOOK: Evaluator Check Off__________

THE PROPER U.N. IDENTIFICATION NUMBER
THE PROPER GUIDE (PAGE) NUMBER
IDENTIFY CHOLORINE