

Department of Public Safety  
Standards and Training  
Fire Standards and Certification  
4190 Aumsville Hwy SE  
Salem, OR 97317  
Phone: 503-378-2100  
Fax: 503-378-4600



**URBAN SEARCH AND RESCUE**  
APPLICATION FOR CERTIFICATION  
(Revised 08/2016)

<b>DPSST Office Use Only</b>	
LEDS Check:	<input type="checkbox"/> OK
OECI Check:	<input type="checkbox"/> OK
Levels:	_____
Date:	_____
Reviewer Initials:	_____

<b>Name:</b> _____ Last First MI	<b>DPSST Fire #:</b> _____
<b>Applicant's Fire Agency:</b> _____	<b>Date of Birth:</b> _____
	<b>Social Security #*:</b> _____ <small>(Required)</small>

\*You are required to provide your Social Security Number (SSN) to DPSST. The authority for this requirement is ORS 25.785 and ORS 305.385, 42 USC 405(c)(2)(C)(i), 42 USC 666(a)(13). Your SSN will only be used for child support enforcement and tax purposes. Failure to provide your SSN will be basis to refuse issuance of a certificate.

In the "Training Completed" column record all applicable DPSST certified course number(s), college/university course number(s), or the fire agency where training was completed. **PROVIDE COPIES OF ALL DOCUMENTATION AS PROOF OF COURSE COMPLETION IF IT IS NOT REFLECTED IN SNAPSHOT.** For all out-of-state college/university courses, provide course descriptions for evaluation. In the "Date" column record the date the training was completed. **Failure to complete this application in its entirety will result in the application being returned.**

RESCUE TECHNICIAN	TRAINING COMPLETED	DATE
I-200 Basic ICS		

- Is applicant certified as a NFPA Structural Collapse Technician?  Yes  No
- Is applicant certified as a NFPA Confined Space Rescue Technician?  Yes  No
- Is applicant certified as a NFPA Vehicle and Machinery Rescue Technician Level?  Yes  No
- Is applicant certified as a NFPA Trench Rescue Technician?  Yes  No
- Is applicant certified as a NFPA Rope Rescue Technician?  Yes  No
- Has applicant completed an Oregon USAR approved TF-1 Cache Course?  Yes  No

LOGISTICS MANAGER	TRAINING COMPLETED	DATE
I-300 Intermediate ICS		
ICS for Structural Collapse Incidents		

- Is applicant certified as a USAR Rescue Technician?  Yes  No
- Has applicant completed an Oregon USAR approved Critical Incident Stress Debriefing Course?  Yes  No
- Has applicant completed an Oregon USAR approved TF-1 Cache Course?  Yes  No
- Has applicant completed an Oregon USAR approved TF-Inventory Control Course?  Yes  No

MEDICAL TECHNICIAN	TRAINING COMPLETED	DATE
I-200 Basic ICS		
FEMA Medical Specialist Course		

- Is applicant certified as a USAR Rescue Technician?  Yes  No
- Is applicant a certified active Oregon Health Division Paramedic or equivalent?  Yes  No
- Has applicant completed an Oregon USAR approved TF-1 Cache Course?  Yes  No
- Has applicant completed an Oregon USAR approved Critical Incident Stress Debriefing Course?  Yes  No

RESCUE COMPANY OFFICER	TRAINING COMPLETED	DATE
I-200 Basic ICS		

- Is applicant certified as a USAR Rescue Technician?  Yes  No
- Has applicant completed an Oregon USAR approved TF-1 Cache Course?  Yes  No
- Has applicant completed an Oregon USAR approved Critical Incident Stress Debriefing Course?  Yes  No

RESCUE TEAM MANAGER	TRAINING COMPLETED	DATE
I-300 Intermediate ICS		
ICS for Structural Collapse Incidents		

- Is applicant certified as a USAR Rescue Technician?  Yes  No
- Has applicant completed an Oregon USAR approved TF-1 Cache Course?  Yes  No
- Has applicant completed an Oregon USAR approved Critical Incident Stress Debriefing Course?  Yes  No

<b>RIGGING TECHNICIAN</b>	<b>TRAINING COMPLETED</b>	<b>DATE</b>
I-200 Basic ICS		
FEMA Rigging Specialist Course		

- Is applicant certified as a USAR Rescue Technician?  Yes  No
- Has applicant completed an Oregon USAR approved TF-1 Cache Course?  Yes  No
- Is Applicant qualified on specific pieces of heavy equipment, showing safety and use competency?  Yes  No

<b>SAFETY OFFICER</b>	<b>TRAINING COMPLETED</b>	<b>DATE</b>
I-300 Intermediate ICS		
ICS for Structural Collapse Incidents		
NFA Incident Safety Officer		

- Is applicant certified as a USAR Rescue Technician?  Yes  No
- Has applicant completed an Oregon USAR approved TF-1 Cache Course?  Yes  No
- Has applicant completed an Oregon USAR approved Critical Incident Stress Debriefing Course?  Yes  No

<b>SEARCH COMPANY OFFICER</b>	<b>TRAINING COMPLETED</b>	<b>DATE</b>
I-200 Basic ICS		
FEMA Technical Search Specialist Course		

- Is applicant certified as a USAR Rescue Technician?  Yes  No
- Has applicant completed an Oregon USAR approved TF-1 Cache Course?  Yes  No
- Has applicant completed an Oregon USAR approved Critical Incident Stress Debriefing Course?  Yes  No

<b>SEARCH TEAM MANAGER</b>	<b>TRAINING COMPLETED</b>	<b>DATE</b>
I-300 Intermediate ICS		
ICS for Structural Collapse Incidents		
FEMA Technical Search Specialist Course		

- Is applicant certified as a USAR Rescue Technician?  Yes  No
- Has applicant completed an Oregon USAR approved TF-1 Cache Course?  Yes  No
- Has applicant completed an Oregon USAR approved Critical Incident Stress Debriefing Course?  Yes  No

<b>SEARCH TECHNICIAN</b>	<b>TRAINING COMPLETED</b>	<b>DATE</b>
I-200 Basic ICS		
FEMA Technical Search Specialist Course		

- Is applicant certified as a USAR Rescue Technician?  Yes  No
- Has applicant completed an Oregon USAR approved TF-1 Cache Course?  Yes  No

<b>TASK FORCE LEADER</b>	<b>TRAINING COMPLETED</b>	<b>DATE</b>
I-300 Intermediate ICS		
ICS for Structural Collapse Incidents		
FEMA Task Force Management & Coordination Course		

- Is applicant certified as a USAR Rescue Technician?  Yes  No
- Has applicant completed an Oregon USAR approved Critical Incident Stress Debriefing Course?  Yes  No

**ATTEST:** As an authorized signer I have reviewed this form for completeness and accuracy. I understand that falsification of this document makes my certifications subject to denial or revocation under ORS 181A.640 and OAR 259-009-0070.

**AS THE APPLICANT:** I am aware that a criminal history check will be conducted with submission of this application for certification. I understand that if I have been convicted of a crime(s) I may be subject to denial or revocation of my application or certification(s):  Yes  No

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Agency Head or Designee

\_\_\_\_\_  
Printed name of Agency Head or Designee

\_\_\_\_\_  
Date