



STATE OF NEW YORK
DEPARTMENT OF STATE
41 STATE STREET
ALBANY, NY 12231-0001

ELIOT SPITZER
GOVERNOR

LORRAINE A. CORTÉS-VÁZQUEZ
SECRETARY OF STATE

Dear Fire Chief,

Your Firefighter has enrolled in the New York State Office of Fire Prevention and Control Firefighter I course. As we strive to give your member the best fire training experience, we need your support during this course to accomplish that goal. Your firefighter cannot succeed without your guiding leadership.

To clearly achieve these objectives, we have created an orientation lesson for Firefighter I. This lesson is the opportunity to demonstrate to your member that our partnership is designed to completely prepare them to perform the most dangerous job in the world. At this lesson the instructor will be requesting that your department supply equipment, apparatus and occasionally your expert personnel to participate in the training and education of your future firefighter.

The orientation is scheduled for the following time and place:

Date ___ / ___ / _____ Time: _____

Location: _____

Please accompany your member and assure that they have a New York State Office of Fire Prevention and Control **Training Authorization letter**. This letter shall be signed by a chief officer stating the student has a current completed **mask fit test** and received **medical clearance for S.C.B.A. use**.

Our instructors look forward to meeting with you and aiding in the development of your new member.

Sincerely,
John F. Mueller
Acting State Fire Administrator

"Everyone Goes Home"