



NFPA CERTIFIED FIRE INSPECTOR I PROGRAM

CFI-I EXAMINATION SCHEDULING FORM

PARTNERSHIP AGENCY USE

Date of Request: _____
Exam Date: _____
Test Site: (Name) _____
(Address) _____

Proctor's Name: _____
Please provide physical mailing address for UPS shipment of exams. _____
(No P.O. Box) *Exam deliveries must be signed for.* _____

Proctor's Phone Number: _____
Proctor's Fax Number: _____
Proctor's Email Address: _____

Please allow at least THREE WEEKS from date of exam request and exam date. The Proctor Agreement will be *faxed to proctor within 72 hours of exam request. If Proctor Agreement is not received, please contact the NFPA Certification Department.

The *Written Examinations* will be shipped by SMT to the Proctor approximately 48 hours prior to the scheduled exam. If the *Written Examinations* have not been received within this timeframe, please contact the NFPA Certification Department immediately. *SMT will email the proctor to alert that the exams have been shipped to the proctor. The shipping container is to be opened and inventoried upon receipt and the Shipment Receipt confirmation is to be faxed back to SMT. The shipping container is then secured until the exam day.

Please list applicant name and social security number. Exams will only be sent for the applicant listed below who is actively enrolled in the NFPA CFI-I Program. For your convenience, you may fax your exam scheduling form to NFPA's Certification Department at 617-984-7127

NOTE: Any Testing Center Fee is the responsibility of the individual applicant.

APPLICANT'S NAME

PROGRAM ADMINISTRATOR SIGNATURE: _____

Please complete and return to:
NFPA Certification Department
1 Batterymarch Park, Quincy, MA 02169
Phone: 617-984-7497 Fax: 617-984-7127