



State Fire Rescue Training Roster

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FIR Class # _____ FRT Class # _____ FRT Topic _____ Class Hours _____ Credit Hours _____

Subject _____ Lead Instructor _____

Location _____ Host Agency _____

Start Date _____ End Date _____ Start Time _____ End Time _____ Commission Code _____

	Full Name (<i>Print Clearly</i>)	Initials	Date of Birth	FF#	Agency/Department	Hours	Grade
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

Lead Instructor Signature _____ Inst. # _____ Area # _____

SFRT Form R-1 Revised 01/01/2021