

**FIRST/JOURNEY LEVEL JAC COMPLETION
CERTIFICATION (4100)**

(No.13 July 2014)

State of California

Natural Resources Agency

M e m o r a n d u m

To: Region
Attn: Region JAC Coordinator

Date:

From: **Signature**
Instructor of Record Name
Title and Unit
Department of Forestry and Fire Protection

Telephone:

Subject: First/Journey-level JAC Completion Certification

This is to certify that effective _____, FFII/FAE _____, (last 4 digits of SSN or JAC ID #) has successfully completed all required training for the (first-year or third-year) JAC program. His/her written examination score is _____% and his/her performance examination scores are as follows:

FIRST YEAR	Percentage		Percentage
<u>Fire Fighter II</u>		<u>Fire Apparatus Engineer</u>	
Ladders/ SCBA		Ladders/SCBA	
Reverse Hose Lay		Pumping from Tank	
Forward Hose Lay		Pumping from Hydrant	
		Pumping from Draft	

THIRD YEAR	Percentage		Percentage
<u>Fire Fighter II</u>		<u>Fire Apparatus Engineer</u>	
Ladders/ SCBA		Ladders/SCBA	
Reverse Hose Lay		Pumping from Tank	
Forward Hose Lay		Pumping from Hydrant	
Ropes, Knots, Rigging		Pumping from Draft	
		Mobile Pumping	

Attached is a copy of the Individual Training Record form from the employees Progress Notebook indicating completion of all required related and supplemental training. CAL FIRE 304's have been submitted to Region JAC Coordinator.

attachment

(Action: Unit submits to Region JAC Coordinator, who will keep a copy in the employee's JAC file and forward original memorandum to Statewide JAC Coordinator for submittal to CFFJAC)