



Scioto County Career Technical Center
Post-Secondary Education

Fire Services Training

Complete, sign and return the last seven (8) pages of this packet to the Firefighter Instructor.

- Checklist for ADA Accommodations and Request for Written Examination Accommodations
- Application for Admission - Fire Training Program (SF.101.3-16)
- Acknowledgement of Receipt (PF.696-1.14)
- Firefighter Release Form (PF.693.14)
- Declaration of Criminal History Information Form (PF.690.14)
- Student Enrollment Data (SF.127.14)
- NFPA 1582 – Medical Evaluation Form (PF.699.18)
- Release of Information (SF.122.14)



Scioto County Career Technical Center Post-Secondary Education

Fire Training Charter #126 Class Guidelines

It is **REQUIRED** to be at the organizational meeting, books are ordered and required files are maintained as directed by Ohio Revised Code for each student. Please follow all the steps below, failure to do so may result in being dropped from the class cycle:

1. Lead Instructor, Senior Instructors, and Assistant Instructors will do their utmost to assist student with requirements, objectives, practical's, bookwork and forms – but it is the student's responsibility to do the necessary work, and have all the necessary forms turned in a timely manner.
2. Complete and return ALL required forms. No partial packets will be accepted. Student is required to read the SCCTC Student Handbook for short-term programs.
3. Student is required to list a current address on all forms. Without a current address completion documentation and card may not be issued. If sponsored by a fire department, ensure that the department chief signs all forms where indicated.
4. Disruptive behavior and/or failure to follow safety requirements **WILL** result in immediate expulsion from the program.
5. Attendance is mandatory for all scheduled hours as described in the entrance requirements, course schedules, subject area content & course objective.
6. Student received a course objective sheet, course schedule and grading policy.
7. Student can be 17 years of age **AND** a senior in high school with a parental or legal guardian signature; they can take the state certification test but will not receive the card until your 18th birthday. It is the student's responsibility to contact the State Fire Division to notify them that they have turned 18.
8. Student **MAY NOT** have a beard (or blocking facial hair determined by instructors to violate Ohio Administrative Code Chapter 4121:1-21.
9. Student **MUST** provide evidence of physical exam as required by Ohio Administrative Code Chapter 4121:1-21.
10. Student **MUST** use SCBA (self-contained breathing apparatus) as required by Ohio Administrative Code Chapter 4121:1-21.
11. Student **MUST** wear all NFPA approved turn out gear as required by Ohio Administrative Code Chapter 4121:1-21.
12. If you are not affiliated with a fire department, you **MUST** pay the tuition fee prior to the first day of class.
13. If requesting Reasonable Accommodations (ADA), please complete the attached form and return to the charter Fire Program Director as soon as possible, this request can take at least 30 days for the Division of EMS to review. For questions concerning, ADA, please make an appointment to speak with the Director.
14. The certification test will be at the Scioto County Career Technical Center (date to be determined). Be there 20 minutes early!
15. Student is responsible for any additional requirements as prescribed by Charter #126 and its Director, as well as the Director of Continuing Education at the Scioto County Career Technical Center.
16. Student must meet **ALL** requirements to take the course:
 - Volunteer Firefighter – Meet the requirements
 - Firefighter I Transitions – Meet the requirements **AND** be a Certified Volunteer Firefighter
 - Firefighter II Transitions – Meet the requirements **AND** be a Certified Firefighter I
 - Fire Safety Inspector – Meet the requirements **AND** be a Certified Firefighter II, and other requirements

Complete the following requirements.

- Submit a copy of driver's license. (FFI Only)
- Review the SCCTC Short-Term Student Handbook.
- Submit ICS-100: Introduction to the Incident Command System.
- Submit IS-700: National Incident Management System. An Introduction.

EMI (Emergency Management Institute) works in collaboration with the whole community to provide training in support of the NIMS Training Program. The Preparedness Branch coordinates EMI's NIMS training efforts with the National Integration Center (NIC) to integrate NIMS doctrine and training with whole community needs.

National Incident Management System (NIMS)

NIMS and NIMS training program information is detailed at: www.training.fema.gov/nims

(FORMS TO BE SIGNED BY DEPARTMENT CHIEF)

- Complete and return Firefighter Waiver (PF.692.14)
- Complete and return Firefighter Letter of Intent (PF.694.14)
- Fire Instructor Disclaimer, Firefighter I - 36-hours Volunteer (PF.697.14)



Plan	Health & Safety Plan		
Date:	1.17.14	Revision Date:	9.29.15; 3.9.16
Description:	<p>OBJECTIVES</p> <ul style="list-style-type: none"> • To insure that students attending classes at SCCTC are provided with a safe learning environment. • To insure that students are medically able to participate in program of study, • To address illnesses and injuries occurring while on the SCCTC campus. <p>IDENTIFICATION OF RESPONSIBILITY FOR COORDINATION OF SERVICES</p> <p>All post-secondary education program instructors, coordinators, director and staff are responsible for maintaining a safe environment and for reporting safety issues. When violations are found, they are to be reported by the person making the discovery. All illnesses and injuries are to be addressed by the first SCCTC employee(s) made aware of the issue.</p> <p>HEALTH</p> <ol style="list-style-type: none"> 1. The costs of all professional services are the responsibility of the student. 2. Some programs require physical exams and other documentation prior to start of class. Check with individual program coordinators for specific requirements. 3. Students with medical conditions which could interfere with the ability to meet course and/or clinical/precepting/externship objectives are to notify the program coordinator at the beginning of the program or as soon as the condition is known. A medical leave of absence may become necessary if illness or injury interferes with academic or clinical/precepting/externship objectives, or if attendance is not maintained per program policy. <ul style="list-style-type: none"> *Program-specific policies may apply – discuss with program coordinator. 4. All students are expected to consult their personal physician for illnesses prior to coming to school. 5. Students who have a medical condition that warrants an identification necklace or bracelet are encouraged to wear them while in attendance at SCCTC. 6. Students are strongly encouraged to carry adequate personal medical/hospitalization insurance. The school provides a small accident coverage policy for each student. Additionally, the health programs provide liability insurance to cover errors made while working with patients/residents during clinical/precepting/externship/internship experiences. The health program faculty is also covered by the liability insurance policy when working with students. 7. While at SCCTC, if an injury or illness occurs that prevents the student from performing their normal daily duties or routines, the issue is to be reported to an instructor, program coordinator, or post-secondary education office staff member immediately. 8. The illness or injury will be evaluated and a determination made as to whether the student needs to leave SCCTC to seek medical treatment or if emergency medical assistance is needed. <ul style="list-style-type: none"> *SCCTC reserves the right to send a student home from the class, lab, or clinical/externship/job site if they their illness/injury could result in harm to themselves or others. The student will be counted as “absent” if sent home by a SCCTC instructor or administrator. 		



9. Students are NOT to bring sick children to class, clinical, externships, or other job sites.
10. Injuries or illnesses which require response by the local Emergency Medical Service or other circumstances identified by the instructor, administrator, or staff member will need to be reported on a SCCTC Accident/Incident Report form and distributed to the appropriate parties. One copy will be placed in the student's personal file.
11. If the illness or injury occurs at a clinical, precepting, externship or other work site, the appropriate instructor/preceptor/supervisor is to be notified immediately and a SCCTC Accident/Incident Report is to be filed.
12. Incident Reports specific to a company or facility where clinical, externship, or other work experience is occurring will be filed, as needed, in addition to the SCCTC Incident Report.

SAFETY

1. Refer to the SCCTC Emergency Action Plan found in the red binder in each lab, classroom or office, for current guidelines on Emergency procedures for weather, accident, intruder or other safety issues. Become familiar with common procedures and implement them consistently, if the need arises.
2. Be alert at all times and report any unusual activity immediately to a supervisor, Deputy/Campus Security (extension 2250 OR Cell: 357-0343), or the post-secondary office (extensions 1103, 1104, 1108, or 1117).
3. Refer to the *SCCTC Post-Secondary Education Center Handbook*, "Appropriate and Safe Behavior", for guidelines on campus safety.
4. Immediately clean up all spills in classrooms, offices or hallways. If larger spills occur, notify a custodial employee promptly for clean-up and restrict access to the area until it has been cleaned.
5. Follow all District rules about open flames, power cords, and other potentially dangerous issues. Report violations observed to an administrator or the adult education office.
6. For the safety of all involved, students are not permitted to bring children to class, clinical, externship or other work sites.

SAFETY & SECURITY REPORT

The annual Safety & Security Report is required by federal law and contains policy statements and crime statistics for the district. This report is in compliance with the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act. It includes certain types of reported crimes that may have occurred on properties owned or controlled by the district being used for educational purposes, and on public property within or immediately adjacent to district properties. This report is available online at http://sciototech.org/home/?page_id=5668. The Ohio Registered Sex Offender list can be accessed at <http://www.drc.ohio.gov/offendersearch/search.aspx>, or <http://www.meganslaw.gov>. These documents are also available in printed format in the post-secondary education office. The annual Safety & Security Report is updated and posted on October 1.

PLAN REVIEW

The SCCTC Health & Safety Plan shall be reviewed no less than annually by the post-secondary director, staff, coordinators, advisory committees, and students.

The Scioto County Career Technical Center
POLICY ON SEXUAL AND GENDER-BASED HARASSMENT
AND OTHER FORMS
OF INTERPERSONAL VIOLENCE

STATEMENT OF POLICY

The Scioto County Career Technical Center (Scioto County CTC) is an institution built upon honor, integrity, trust, and respect. Consistent with these values, The Scioto County CTC is committed to providing a safe and non-discriminatory learning, living, and working environment for all members of its community. The Scioto County CTC does not discriminate on the basis of sex or gender in any of its education or employment programs and activities. To that end, this Policy prohibits specific forms of behavior that violate Title IX of the Education Amendments of 1972 (“Title IX”); Title VII of the Civil Rights Act of 1964 (“Title VII”). Such behavior also requires The Scioto County CTC to fulfill certain obligations under the Violence Against Women Reauthorization Act of 2013 (“VAWA”) and the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (“Clery Act”).

The Scioto County CTC is committed to providing a work and school environment free of unlawful harassment or discrimination. In furtherance of this commitment the Scioto County CTC provides training to key staff members to enable The Scioto County CTC to handle any allegations of sexual harassment or sexual violence promptly and effectively. School Policy prohibits harassment or discrimination based on race, religion, creed, color, national origin, ancestry, sex (including pregnancy, childbirth or related medical conditions), gender identity, military or veteran status, physical or mental disability, medical condition, marital status, age, sexual orientation, gender, gender identity or expression, genetic information or any other basis protected by the federal, state or local law. This Policy also prohibits domestic violence, dating violence, sexual assault, and stalking, as defined below, and referred to as Prohibited Conduct. Additionally, in accordance with Title IX of the Education Amendments of 1972, The Scioto County CTC has jurisdiction over Title IX complaints.

The Scioto County CTC’s anti-harassment Policy applies to all persons involved in the operation of The Scioto County CTC, and prohibits unlawful harassment by any employee of The Scioto County CTC, as well as students, customers, vendors or anyone who does business with The Scioto County CTC. It further extends to prohibit unlawful harassment by or against students. Any employee, student or contract worker who violates this Policy will be subject to disciplinary action. To the extent a customer, vendor or other person with whom the School does business engages in unlawful harassment or discrimination, The Scioto County CTC will take appropriate corrective action.

As part of Scioto County CTC's commitment to providing a harassment-free working and learning environment, this Policy shall be disseminated to The Scioto County CTC community through publications, The Scioto County CTC website, new employee orientations, student orientations, and other appropriate channels of communication. The Scioto County CTC provides training to key staff members to enable The Scioto County CTC to handle any allegations of sexual harassment or sexual violence promptly and effectively. The Scioto County CTC will respond quickly to all reports, and will take appropriate action to prevent, to correct, and if necessary, to discipline behavior that violates this Policy.

PRIMARY AWARENESS PROGRAMS

The Scioto County Career Technical Center provides programming for all incoming students and new employees to share information and resources to prevent violence, including domestic violence, sexual assault and staking, promote safety, and reduce perpetration. In addition to this Policy the Campus Safety & Security page on the district website provides information about sexual and gender-based harassment including the district's policies prohibiting Sexual and Gender-Based Harassment, and Anti-Bullying/Hazing.

Student orientation and handbook covers Sexual and Gender-Based Harassment, and Anti-Bullying/Hazing. Policies are also reviewed by program advisory committee members annually. Key staff members receive sexual harassment and sexual violence training. These key staff members provide in-service training for other staff.

ONGOING PREVENTION AND AWARENESS CAMPAIGNS

The Scioto County Career Technical Center provides students with ongoing prevention and awareness campaigns that consist of programming, initiatives, and strategies that are sustained over time and focus on increasing understanding of topics relevant to, and skills for addressing Prohibited Conduct, using a range of strategies with audiences. The specific ongoing prevention and awareness campaigns are (1) ACLU Gender-Based Violence & Harassment: Your School, Your Rights Factsheet available for all students; and, (2) Confronting Sexual Harassment in School: What Every Student Needs to Know playing in the school lobby at scheduled intervals throughout the school year.

RISK REDUCTION

Scioto County Career Technical Center provides information on risk reduction to recognize warning signs of abusive behavior and how to avoid potential attacks. Risk reduction consists of options designed to decrease perpetration and bystander inaction and to increase empowerment in an effort to promote safety and to help individuals and communities address conditions that facilitate violence. The Scioto County Career Technical Center is using the staff training, new student orientation, printed materials, and video reenactments focusing on the victims of harassment and illustrates how harassment can take many forms, including physical touching and grouping, verbal jokes and rumors, gay bashing, and hurtful text and online messages. The video reenactments will play in the school lobby at scheduled intervals throughout the school year.

DEFINITIONS

The following definitions are used throughout this document and reflect the Policy of the Scioto County Career Technical Center:

Sexual Assault consists of (1) Sexual Contact and/or (2) Sexual Intercourse that occurs without Affirmative Consent.

Sexual Contact is:

- Any intentional sexual touching, however slight,
- With any object or body part (as described below)
- Performed by a person upon another person

Sexual Contact includes (a) intentional touching of the breasts, buttocks, groin or genitals, whether clothed or unclothed, or intentionally touching another with any of these body parts; and (b) making another touch you or themselves with or on any of these body parts.

Sexual Intercourse is:

- Any penetration
- However slight
- With any object or body part (as described below)
- Performed by a person upon another person

Sexual Intercourse includes (a) vaginal penetration by a penis, object, tongue, or finger; (b) anal penetration by a penis, object, tongue, or finger; and (c) any contact, no matter how slight, between the mouth of one person and the genitalia of another person.

Affirmative Consent is:

- Informed (knowing)
- Voluntary (freely given)
- Active (not passive), meaning that, through the demonstration of clear words or actions, a person has indicated permission to engage in mutually agreed-upon sexual activity
- Consent is an affirmative, unambiguous, and conscious decision by each participant to engage in mutually agreed-upon sexual activity. It must be given without coercion, force, threats or intimidation. Consent must be ongoing throughout a sexual encounter and can be revoked at any time. Once consent is withdrawn, the sexual activity must stop immediately.

Affirmative Consent cannot be obtained by Force. Force includes (a) the use of physical violence, (b) threats, (c) intimidation, and/or (d) coercion.

Intimidation is an implied threat that menaces or causes reasonable fear in another person. A person's size, alone, does not constitute intimidation; however, a person's size may be used in a way that constitutes intimidation (e.g., blocking access to an exit).

Coercion is the use of an unreasonable amount of pressure to gain sexual access. Coercion is more than an effort to persuade, entice, or attract another person to have sex. When a person makes clear a decision not to participate in a particular form of Sexual Contact or Sexual Intercourse, a decision to stop, or a decision not to go beyond a certain sexual interaction, continued pressure can be coercive.

Sexual Harassment is defined as unwelcome conduct of a sexual nature. It includes unwelcome sexual advances, requests for sexual favors, and other verbal, nonverbal, or physical conduct of a sexual nature. Sexual harassment is conduct that explicitly or implicitly affects a person's employment or education or interferes with a person's work or educational performance or creates an environment such that a reasonable person would find the conduct intimidating, hostile or offensive. Sexual harassment may be directed toward a person of the opposite or same sex and may include explicit sexual propositions, sexual innuendo, suggestive comments, sexually oriented "kidding" or "teasing", practical jokes, jokes about or displays of obscene printed or visual material, questions about sexual fantasies, preferences or history, and physical contact such as patting, pinching or intentionally brushing against another person's body.

Sexual Violence is defined as physical sexual acts engaged in without the consent of the other person or when the other person is unable to consent to the activity. Sexual violence includes sexual assault, rape, battery, and sexual coercion; domestic violence; dating violence; and stalking.

Domestic Violence is defined as abuse committed against an adult or a minor who is a spouse or former spouse, cohabitant or former cohabitant, or someone with whom the abuser has a child, has an existing dating or engagement relationship, or has had a former dating or engagement relationship.

Dating Violence is defined as abuse committed by a person who is or has been in a social relationship of a romantic or intimate nature with the victim.

Sexual Assault occurs when a physical sexual activity is engaged in without the consent of the other person or when the other person is unable to consent to the activity. The activity or conduct may include physical force, violence, threat, or intimidation, ignoring the objections of the other person, causing the other person's intoxication or incapacitation through the use of drugs or alcohol, and taking advantage of the other person's incapacitation (including voluntary intoxication).

Stalking is behavior in which a person repeatedly engages in conduct directed at a specific person that places that person in reasonable fear of his or her safety or the safety of others.

Bystander Intervention consists of safe and positive options that may be carried out by an individual or individuals to prevent harm or intervene when there is risk of an occurrence of Prohibited Conduct. It also includes recognizing situations of potential harm, understanding institutional structures and cultural conditions that facilitate violence, overcoming barriers to intervening, identifying safe and effective intervention options, and taking action to intervene.

Ohio Legal Definitions Relative to the Clery Act/Violence Against Women Act (VAWA)

Any criminal investigation conducted by a law enforcement agency with responsibility for investigating an alleged offense of sexual assault, dating violence, domestic violence, and stalking complaints will operate in accordance with criminal elements as defined by the Ohio Revised Code. /the Ohio Revised Code (ORC) does not explicitly define "consent" or "sexual assault" however Chapter 2907 of the ORC defines "sex offenses" in Ohio criminal law. Ohio law does not define "dating violence" but Chapter 2901 of the ORC outlines 36 "offenses of violence" in Ohio criminal law Chapter 2919.25 of the ORC outlines the elements of a domestic violence offense as:

- A. No person shall knowingly cause or attempt to cause physical harm to a family or household member.
- B. No person shall recklessly cause serious physical harm to a family or household member.
- C. No person, by threat of force, shall knowingly cause a family or household member to believe that the offender will cause imminent physical harm to the family or household member.

Ohio Revised Code 2903.211 outlines the elements of "menacing by stalking" as:

(A)

1. No person by engaging in a pattern of conduct shall knowingly cause another person to believe that the offender will cause physical harm to the other person or cause mental distress to the other person. In addition to any other basis for the other person's belief that the offender will cause physical harm to the other person or the other person's mental distress the other person's belief or mental distress may be based on words or conduct of the offender that are directed at or identify a corporation, association, or other organization that employs the other person or to which the other person belongs.
2. No person, through the use of any electronic method of remotely transferring information, including but not limited to any computer, computer network, computer program or computer system, shall post a message with purpose to urge or incite another to commit a violation of division (A)(1) of this section.
3. No person, with a sexual motivation, shall violate division (A)(1) or (2) of this section

PROHIBITED CONDUCT

This Policy strictly prohibits sexual or other unlawful harassment or discrimination as well as sexual violence, which includes domestic violence, dating violence, sexual assault and stalking. Gender-based harassment, including acts of verbal, nonverbal or physical aggression, intimidation, or hostility based on sex or sex-stereotyping are strictly prohibited, even if those acts do not involve conduct of a sexual nature. Sexual or other unlawful harassment or discrimination includes any verbal, physical or visual conduct based on sex, gender, race, age, national origin, disability or any other legally protected basis if:

- i. submission to such conduct is made either explicitly or implicitly a term or condition of an individual's education or employment;*
- ii. submission to or rejection of such conduct by an individual is used as a basis for decisions concerning that individual's education or employment; or*
- iii. it creates a hostile or offensive work environment, which means the alleged conduct is sufficiently serious to limit or deny a student's ability to participate or benefit from the student's education program.*

Unlawful harassment or discrimination may include racial epithets, slurs and derogatory remarks, stereotypes, jokes, posters or cartoons based on race, national origin, age, disability, marital status or other legally protected categories.

COMPLAINT/GRIEVANCE PROCEDURE

If you believe that you have experienced or witnessed harassment or sexual violence, notify your instructor, supervisor, Human Resources, or the Title IX Coordinator as soon as possible after the incident. If you experience what may have been Prohibited Conduct, it is important to preserve evidence. Any person who has been a recipient of physical sexual violence is urged to go directly to the Emergency Room at any local hospital for medical attention. For a list of hospitals close to each campus, including those with sexual assault forensic nurse examiners (SAFE) or staff specially trained for sexual misconduct examination and evidence collection. Do not allow an inappropriate situation to continue by not reporting it, regardless of who is creating the situation.

No employee, contract worker, student, vendor or other person who does business with The Scioto County CTC is exempt from the prohibitions in this Policy. Supervisors will refer all harassment complaints to the Title IX Coordinator for student-related complaints and to the Human Resources Department if the complaint involves an employee. In order to facilitate the investigation, your complaint should include details of the incident or incidents, names of the individuals involved and names of any witnesses.

All complaints involving a student will be referred to the campus's Title IX Coordinator. The Title IX Coordinator is listed below and has the responsibility of overseeing all Title IX complaints and identifying and addressing any patterns or systemic problems that arise during the review of such complaints.

Title IX Coordinator:
Josh Shoemaker
951 Vern Riffe Drive
Lucasville, OH 45648
740-259-5522 ext 2234
josh.shoemaker@sciototech.org

The Scioto County CTC ensures that its employee(s) designated to serve as Title IX Coordinator(s) have adequate training on what constitutes sexual harassment, including sexual violence, and that they understand how The Scioto County CTC's grievance procedures operate. Because complaints can also be filed with an employee's supervisor or Human Resources, these employees also receive training on The Scioto County CTC's grievance procedures and any other procedures used for investigating reports of sexual harassment.

INVESTIGATION OF COMPLAINTS

In response to all complaints, The Scioto County CTC promises prompt and equitable resolution through a reliable and impartial investigation of complaints, including the opportunity for both parties to present witnesses or other evidence. The time necessary to conduct an investigation will vary based on complexity but will generally be completed within sixty (60) days of receipt of the complaint. The Scioto County CTC shall maintain confidentiality for all parties to the extent possible, but absolute confidentiality cannot be guaranteed. In cases where a student does not give consent for an investigation, The Scioto County CTC will weigh the student's request for confidentiality against the impact on School safety to determine whether an investigation must proceed. Complainants should be aware that in a formal investigation due process generally requires that the identity of the charging party and the substance of the complaint be revealed to the person charged with the alleged harassment.

The preponderance of the evidence standard will apply to investigations, meaning The Scioto County CTC will evaluate whether it is more likely than not that the alleged conduct occurred. Both parties will receive written notice of the outcome of the complaint.

During the investigation, The Scioto County CTC will provide interim measures, as necessary, to protect the safety and wellbeing of students and/or employees involved.

Initial Assessment

Upon receipt of a report of Prohibited Conduct committed by a Student, the Title IX Coordinator will make an initial assessment of the reported information and respond to any immediate health or safety concerns raised by the report. In this initial assessment, the Title IX Coordinator will:

- A. Assess the Complainant's safety and well-being and offer The Scioto County CTC's immediate support and assistance;
- B. Inform the Complainant of the right to seek medical treatment, and explain the importance of obtaining and preserving forensic and other evidence;
- C. Inform the Complainant of the right to contact law enforcement or on campus police, be assisted by Scioto County CTC to contact law enforcement or on campus police and decline to contact law enforcement, and/or seek a protective order or similar lawful order.
- D. Inform the Complainant about school and community resources, the right to seek appropriate and available remedial and protective measures, and how to request those resources and measures. Said resources include written information on available counseling, mental health, victim advocacy, legal assistance, visa and immigration assistance, and student financial aid.
- E. Explain The Scioto County CTC's prohibition against Retaliation and that The Scioto County CTC will take prompt action in response to any act of Retaliation;
- F. Assess the nature and circumstances of the report, including whether it provides the names and/or any other information that personally identifies the Complainant, the Respondent, any witness, and/or any other third party with knowledge of the reported incident;
- G. Ascertain the ages of the Complainant and the Respondent, if known, and, if either of the parties is a minor (under 18), contact the appropriate child protective service agency; and

- H. Communicate with appropriate school officials to determine whether the report triggers any Clery Act obligations, including entry of the report in the daily crime log and/or issuance of a timely warning and take steps to meet those obligations.
- I. Communicate with appropriate school officials if the crime is determined “unfounded” by law enforcement officials so the information may be reported in The Scioto County CTC’s Annual Security Report as “unfounded” and withheld from its crime statistics.

Regardless of whether the victim chooses to report the crime to local police or local law enforcement, victims will be provided written information about options for and available assistance in changing academic, living, transportation and working situations, if so requested by the victim and if such accommodations are reasonably available.

To initiate a criminal investigation, reports of sexual violence should be made to “911” or local law enforcement. The criminal process is separate from The Scioto County CTC’s disciplinary process. To the extent that an employee or contract worker is not satisfied with the school’s handling of a harassment or discrimination complaint, he or she may also contact the appropriate state or federal enforcement agency for legal relief.

RETALIATION PROHIBITED

The Scioto County CTC will not retaliate against you for filing a complaint, and will not tolerate retaliation by students or employees. If you believe you have been retaliated against, you should promptly notify your supervisor, Human Resources or the Title IX Coordinator.

REPORTING REQUIREMENTS

Victims of sexual misconduct should be aware that School administrators must issue timely warnings for incidents reported to them that pose a substantial threat of bodily harm or danger to other members of the campus community. The Scioto County CTC will make every effort to ensure that a victim’s name and other identifying information is not disclosed, while still providing enough information for community members to make safety decisions in light of the danger. The Scioto County CTC reserves the right to notify parents/guardians of dependent students regarding any health or safety risk, or a change in student status.

Rights and Options Complainants and Respondents can expect:

Scioto County CTC procedures and proceedings for institutional disciplinary action in cases of alleged domestic violence, dating violence, sexual assault, or stalking provide a prompt, fair, and impartial investigation and resolution. Proceedings are conducted by officials who receive annual training on issues related to domestic violence, dating violence, sexual assault, and stalking and how to conduct an investigation and hearing process that protects the safety of victims and promotes accountability.

The Complainant and Respondents are entitled to the same opportunities to have others present during an institutional disciplinary proceeding, including the opportunity to be accompanied to any related meeting or proceeding by an advisor of their choice. Both the Complainant and Respondent will be simultaneously informed, in writing of the outcome of any disciplinary proceeding that arises from an allegation of domestic violence, dating violence, sexual assault, or stalking. The Complainant and Respondent will also be informed in writing of any change to the results that occurs prior to the time that such results become final, the final results, and procedures for appeal.

- A. The responsibility to provide truthful information in connection with any report, investigation, or resolution of Prohibited Conduct under the Policy;

- B. The opportunity to articulate concerns or issues about proceedings under the Policy;
- C. Timely notice of any meeting or proceeding at which the party's presence is contemplated by the Policy;
- D. Written notice of an investigation, including notice of potential Policy violations and the nature of the alleged Prohibited Conduct;
- E. The opportunity to challenge the Investigator or any member of the Review Panel for bias or conflict of interest;
- F. The opportunity to offer information, present evidence, and identify witnesses during an investigation;
- G. The opportunity to be heard, orally and/or in writing, as to the determination of a Policy violation and the imposition of any sanction(s);
- H. Timely and equal access to any information that will be used during proceedings and related meetings;
- I. Reasonable time to prepare any response;
- J. Written notice of any extension of timeframes for good cause; and
- K. Written notice of the outcome of any Formal Resolution proceedings, including the determination of a Policy violation, imposition of any sanction(s), and the rationale for each.

Sanctions and Discipline

Following a final determination, students found responsible for sexual misconduct violations including rape, acquaintance rape, dating violence, domestic violence, sexual assault, and stalking, are subject to the full range of sanctions under the Student Code of Conduct. Sanctions include reprimand, probation, suspensions, and expulsion.

Any employee determined by The Scioto County CTC to be responsible for unlawful harassment or discrimination will be subject to appropriate disciplinary action, up to and including termination. Remedies for student-related claims may include, but are not limited to, an order to stay away, suspension or expulsion.

ADDITIONAL INFORMATION

Students may contact the Title IX Coordinator with any questions related to the Sexual and Gender-Based Harassment and Other Forms of Interpersonal Violence Policy. In Addition, the U.S. Department of Education Office for Civil Rights ("OCR") investigates complaints of unlawful harassment of students in educational programs or activities. This agency may serve as a neutral fact finder and will attempt to facilitate the voluntary resolution of disputes with the parties. For more information, visit the OCT website at: <http://www.hhs.gov/ocr/>.

**Scioto County Career Technical Center
Post-Secondary Education
Fire Training Student Handbook**

FIRE TRAINING CHARTER # 126

2018-2019



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This handbook of rules and regulations shall be used as a guide during the time that adult students are enrolled in the Scioto County Career Technical Center Post-Secondary Education.

Refer to the current years SCCTC Student Handbook for the following information.

Welcome	Grading Policy	Visitors
Mission Statement	Attendance Policy	Substance Abuse Policy
Vision Statement	Satisfactory Academic Progress	Drug Testing Policy
Accreditation	Dismissal Policy	Smoking Policy
Campus Locations	Program Re-Entry Policy	Dangerous "Weapons-In-The-School" Policy
Office Hours	Early Occupational Placement	Search and Seizure Policy
Organizational Chart	Program Completion	Anti-Harassment Policy
Administration & Board Members	Transcript Request	Sexual Harassment
Post-Secondary Staff	Articulation Agreements	Race, Color, National Origin, and Disability Harassment
Admissions	Career Counseling	Anti-Bullying/Hazing Policy
WorkKeys	Students Records	Grievance Policy
Financial Aid	Professional Appearance	Emergency Action Plan – Fire, Tornado
Tuition – Full-Time Programs	Appropriate and Safe Behavior	Campus Security/Campus Crime Report/Clery Act
Refunds – Full-Time Programs	Damages and Losses	Gainful Employment
Debt Collection & Recovery Services	Computer/Copier	
Enrollment Requirements	Incident Reports	
Insurance/Accidents	Class Cancellations	
Advance Standing/Transfer Policy	Telephone Usage and Emergency Calls	
Internal Credit Transfer Policy	Parking/Vehicle Operation	

David Strickland, SCCTC Fire Training Program Coordinator

Fire Services Training Instructors:

Everett Hatfield, Fire Training Instructor
Maria Donini, Fire Training Instructor
Anthony Shy, Fire Training Instructor
Tim Boyd, Fire Training Asst. Instructor
David Cooper, Fire Training Asst. Instructor

Fire Advisory Members:

Mike Davis, Vernon Township Fire Department
Joe Rawlins, OVFA Vice President
George Moore, Green Township Fire Chief
Dean Hoover, Porter Township Fire Chief
Terry Horton, Valley Township Fire Chief

If a student has or develops special needs due to a disability, the student must provide medical documentation of disability to allow our staff to work with administrative, instructional and maintenance staff to evaluate accommodations. Once a student provides the charter with approved documentation and files a Request for Reasonable Accommodations form with the charter fire training program coordinator, the charter will then follow the EMS department guidelines for submitting these documents to the State for approval. All students are made aware of this policy during the organizational meeting held prior to class start.

Admissions Requirements for Firefighter Training

The charter follows the Revised Code and EMS/Fire Training Division state-mandated policies regarding admissions to Fire Services Training detailed below:

- 17 years of age and currently a senior in high school, a parent or legal guardian must sign a form and the application prior to admission.
- 18 years of age or older if not currently in high school before first day of class
- Have not been convicted, pled guilty, or had a judicial finding of guilt for any of the following: (OAC 4765-11-03)
- Fraud or material deception in applying for, or obtaining a certificate issued in accordance with this chapter;
- A felony;
- A misdemeanor involving moral turpitude;
- A violation of any federal, state, county, or municipal narcotics law;
- Any act committed in another state that, if committed in Ohio, would constitute a violation set forth in OAC 4765-11-03.
- Provide a copy of a valid and current Ohio Driver's License.
- Must not have beard/facial hair that violates ORC 4121.1-21.
- Must provide evidence of a physical examination (as required by the ORC 124.42) prior to start of class (fire department chiefs may sign waiver signifying candidate student has such an exam on file or already a certified firefighter).
- Students that are NOT sponsored by a fire department must provide proof of health and accident insurance coverage prior to start of class. Sponsored students must have their department chief sign off on physical verification form.
- Must wear all NFPA approved turn out gear when directed (as required by Ohio Administrative Code 4121:1-12).
- Must use Self Contained Breathing Apparatus (SCBA) when directed (as required by Ohio Administrative Code 4121:1-12).
- Must read and sign "Waiver of Liability" form.
- Must meet ALL other Ohio State Dept of Fire Training, as well as charter requirements.

Pre-Requirements for Fire Services Courses

Must meet all firefighter certification re-requisites:

- All fire services courses require that NIMS 100 & 700 completion documentation are either on file with the program director or verified on file at their fire department prior to issuance of certification.
- Must be a certified Volunteer Firefighter to take Firefighter I/Transitions (100 hour).
- Must be a Firefighter I to take Firefighter II (136 hour).
- Must have 5 years as a firefighter/fire safety inspector (including 3 years immediately prior to course), and successful completion of knowledge exam to take Fire Services Instructor.
- Fire Safety Inspector has the following requirements:
- Must be employed by the office of the state fire marshal;
- Must be employed by a firefighting agency (ORC 9.60);
- Must be employed by a private fire company (ORC 9.60);
- Must submit a letter of recommendation by employer;
- Must hold current firefighter certificate issued under section 4765.55 of the Revised Code;
- Must pass knowledge exam.

Payment Policy:

For fire department sponsored students, fire departments chiefs must sign off on the sponsor/payment form for students to defer payment to the fire department. Fire departments will receive student tuition billing after class completion (this includes ALL students after that do not withdraw after the day of class).

For self-paying students, all tuition is accountable prior to the first day of class. Students will not be permitted to attend classes until fees have been paid or arrangements for payment have been made. All payment arrangements must be signed documents detailing the student, ALL costs, and the details of the payment arrangements.

No cash refund will be made to students removed from programs for disciplinary or attendance reasons.

If not included in the cost of tuition, students are responsible for securing all books, workbooks, uniforms, tools, safety equipment, insurance/testing fees or other items that may be required. Books, tools, or supplies will not be issued until paid in full or payment arrangements made for self-paying non sponsored students.

Withdrawal Policy:

Students that have attended the course starting from the first day may withdraw from the program by completing and submitting a WITHDRAWAL FORM located at the Scioto County Career Technical Center's front office located at 951 Vern Riffe Drive, Lucasville, Ohio (Taylor Building). The student must file the Withdrawal Form to be to be considered Officially Withdrawn. Students that just fail to show up for the class past any possibility of make-up, or fail to notify instructor or coordinators, will fall under the DISMISSAL POLICY.

Grade Methodology

1. The following grade methodology is to be followed by the charter:
 - a. a cumulative C average or higher as required by the specific program guideline is maintained and students must have passing grades in all subjects in order to receive a certificate, and
 - b. all absences **must be within acceptable limits** at any time during a class period. All absences are to be scheduled with the instructor for make-up.
2. Grades are important in two main areas of your curriculum:
 - a. Practical: hands-on, practical experiences;
 - b. Classroom: accompanying texts, workbooks, media materials, etc.
3. Grading Scales: 100 to 93 (A), 92 to 85 (B), 84 to 76 (C), 75 to 69 (D), 68 to 0 (F)

A cumulative grade of "C" or higher will be determined not to be making satisfactory progress. It is the student's responsibility to monitor his/her own individual grades throughout the class and to contact the instructor for any concerns regarding his/her progress in the program. . If a student's average falls below C, they are advised to seek tutorial counsel or consider withdrawing from the program.

State Examination:

The State Fire Certification examination is administered as the end of the course exam. Students must have successfully completed the course to be eligible to take the State Certification examination. The testing facility follows state mandated rules when administering the testing.

Practicals:

Performance is graded on a Satisfactory/Unsatisfactory basis. A practical lab grade of SATISFACTORY is required in each evaluation area. The criteria used for this grading includes: attendance, appearance, attitude, knowledge and skill performance.

Emergency Call Response During Class Policy

- 1) **The charter prohibits ALL students from responding, and they are notified prior to class of this prohibition.**
- 2) No class member may be on a response crew during class hours.
- 3) All students must meet the class hour requirements; therefore any missed hours due to an emergency response must be made up – hour by hour.
- 4) If a class is being held at a local fire department, and that department requires response, then the class may be rescheduled to accommodate that department. Rescheduling may include a suspension of class until the response is over or a rescheduling of that class day.
- 5) In the case of a Homeland Security or National Security Emergency event, all certificate holding emergency service personnel will be released to their respective departments and the class will be rescheduled.
- 6) In all instances, missed classes are a responsibility of the student. Required class hours **MUST** be completed prior to the charter offering a certificate of completion and authorizing the state certification test.

Criteria for Successful class completion

Volunteer Firefighter: Students are required to attend all sessions of the course and must pass all written exams (minimum 70%) and all practical examinations (satisfactory).

Firefighter 1/Transition: Students are required to attend all sessions of the course and must pass all written exams (minimum 70%) and all practical examinations (satisfactory).

Firefighter 1: Students are required to attend all sessions of the course, complete all evolutions, and must pass all written exams and practical objectives.

Firefighter II: Students are required to attend all sessions of the course and must pass all written exams and all practical objectives.

Firefighter I & II: Students are required to attend all sessions of the course, complete all evolutions, and must pass all written exams and practical objectives.

Fire Instructor: Students must attend all scheduled classes and pass all objectives.

Fire Safety Inspector: Students are required to attend all scheduled classes and pass all requirements.

State Certification

Following satisfactory completion of the course and testing, a Certificate of Completion will be saved in the student file. A copy of the Certificate will be given to the student, who is eligible to immediately begin work in their area of certification. The office of Ohio EMS/Fire will issue a State Firefighter certification card to the student. In the case of Volunteer firefighters, the Fire Chief will insure that all volunteers will continue training to meet the NFPA 1001 standard.

Lecture and Practical Policies

1. Students must attend all scheduled classes and work sessions.
2. Students must be on time for classes and work sessions.
3. Short breaks are provided during classes at the discretion of the instructor. Students should return to class promptly after the break.

NFPA Approved gear

NFPA Approved Gear/SCBA: Students are required to use only NFPA approved and currently certified gear. Due to the potentially dangerous environment students are exposed to during training, safety is essential. Instructors are very aware of this, and insure that students use only NFPA approved gear. Students are required to provide their own gear from their respective departments. Non-affiliated students will be able to borrow gear from affiliated departments.

In order to ensure that the student is protected during firefighting situations, the faculty requires the student to report with the following equipment, which must meet the respective minimum acceptable standards for equipment (4121:1-21 Fire Fighting):

NFPA 1971 – 2013 Edition

- Coat and pants, with liner and moisture barrier
- Boots
- Gloves
- Helmet
- Nomex or PBI Hood

Certified Instructor Policy

It is the policy of this fire training charter to use only certified fire services instructors that hold required certifications in the level of the class they instruct. All instructors are required to submit annual certification documentation to the program director.

Assistant instructors are additionally required to hold the level of certification of the class they are assisting, or guest instructors must possess special training and certifications to assist in special topics classes.

All instructors must be Scioto County CTC employees, guest speakers are not required to be employees.

Live Fire Evolutions Procedures

The charter submits all instructor certifications to the Division of EMS for record on file.

All instructors for live fire training shall have completed the Live Fire Operations Course, or have been grandfathered.

The charter follows guidelines based upon NFPA 1403 standard on Live Fire Training Evolutions

The training charter typically uses the Non-Gas-Fired Training Center Building (burn building) located at the United States Enrichment Corp. (USEC) in Piketon, Ohio. The live fire training also adheres to local, state, and federal EPA regulations. Since we use the USEC burn building, we also adhere to and accommodate all USEC live fire training policies and requirements.

The training charter will, upon occasion, utilize the State Fire Marshal's mobile live burn training unit as permitted. When doing so, the State Fire Marshal's training office shall submit a burn plan for the charter's files.

The following guidelines summarize the live fire training policy and mechanisms, and course initiation packets notify all instructors and students of this prior to training:

All participants MUST have NFPA compliant gear, tools, and equipment prior to training.

A qualified Safety Officer shall be appointed for all live fire training exercises.

A qualified instructor who has the training and experience to supervise students and is deemed equivalent to an instructor defined in NFPA 1041 shall accompany students for each training evolution.

One NFPA 1041 qualified instructor shall be determined as lead instructor for the training session.

Full turnout gear must be worn by anyone entering the training building when any smoke generation (real or artificial), or live fire training is conducted. Self Contained Breathing Apparatus (SCBA) shall be readily available (has to be in place with mask hanging, ready to be placed on).

A pre-burn plan shall be prepared for the building and shall be utilized in the pre-burn briefing session. All interior rooms, hallways, and exterior openings shall be indicated on the plan.

Prior to conducting live fire training, all participants shall have knowledge of the layout of the building to facilitate necessary evacuation.

Safety personnel (backup hose lines, EMS personnel, etc.) shall be determined at the beginning of each training session by the lead training instructor.

A live fire evolution checklist will be used prior to any live fire training exercise.

USEC Fire Department/Brigade Exercise Controller must be present during entire live fire training exercise and have same control authority as the Safety Officer when the live burn is on their burn building. Additionally, all burn plans must be approved or revised by a USEC Fire Exercise Controller when using their burn building.

When utilizing State Fire Marshal's mobile training unit, additional procedures they request will be added.

Schedule, Content and Objectives

Course Schedule - Course offering schedules will be supplied to candidate students at the informational meeting held prior to class start. The schedule will detail all hours and topics of the course, dates for the practicals, and the date of the Ohio State Fire test.

Course Content – Course content will comply with all Ohio Division of EMS requirements for training to include topics, practicals, and exams. The charter uses the following Textbook for the course:

Course Objectives – The training charter follows the required guidelines from the Ohio Division of EMS regarding suggested hours and objectives:

Volunteer Firefighter:

The course objective and content are designed to meet the 36-hour training required by the Division of EMS and DOES NOT allow trainees to participate in live burn evolutions according to NFPA standard 1403 and fire department orientation as listed in NFPA standard 1001.

It ends within the consecutive 12-month period.

As stated above, it DOES NOT allow students to participate in live burn evolutions PRIOR to obtaining state certification.

It issues a document of course completion to each student who successfully completes the training program.

It requires trainees to provide written documentation of successful completion of the following required pre-courses before allowing the trainee to obtain state certification:

National Incident Management System course IS-700

Incident Command System course IS-100

Firefighter I Transitions:

This course meets the 84-hour training required by the Division of EMS and meets objectives listed in the NFPA 1001 Firefighter I.

Additionally students complete the required 16-hour emergency vehicle operations course that meets requirements of NFPA standards 1451 and 1002. The charter uses the objectives check-off document from the state fire website. It ends within the consecutive 12-month period.

It issues a document of course completion to each student who successfully completes the training program.

It requires trainees to provide written documentation of successful completion of the following required pre-courses before allowing the trainee to obtain state certification:

National Incident Management System course IS-700

Incident Command System course IS-100

Firefighter I:

This course meets the 120-hour training requirement and meets objectives listed in the NFPA 1001 Firefighter I.

Students complete the required 16-hour emergency vehicle operations course that meets requirements of NFPA standards 1451 and 1002. The charter uses the objectives check-off document from the state fire website.

It ends within the consecutive 12-month period.

It issues a document of course completion to each student who successfully completes the training program.

It requires trainees to provide written documentation of successful completion of the following required pre-courses before allowing the trainee to obtain state certification:

National Incident Management System course IS-700

Incident Command System course IS-100

Firefighter II Transitions

This course meets the 120-hour training required by the Division of EMS and meets objectives listed in the NFPA 1001 Firefighter II.

Students complete the required 16-hour emergency vehicle operations course that meets requirements of NFPA standards 1451 and 1002. The charter uses the objectives check-off document located on the state fire website.

It ends within the consecutive 12-month period.

It issues a document of course completion to each student who successfully completes the training program.

It requires trainees to provide written documentation of successful completion of the following required pre-courses before allowing the trainee to obtain state certification:

National Incident Management System course IS-700

Incident Command System course IS-100

Firefighter I & II

This course meets the 240-hour training required by the Division of EMS and meets objectives listed in the NFPA 1001 Firefighter II.

Students complete the required 16-hour emergency vehicle operations course that meets requirements of NFPA standards 1451 and 1002. The charter uses the objectives check-off document found on the state fire website.

It ends within the consecutive 12-month period.

It issues a document of course completion to each student who successfully completes the training program.

It requires trainees to provide written documentation of successful completion of the following required pre-courses before allowing the trainee to obtain state certification:

National Incident Management System course IS-700

Incident Command System course IS-100

Fire Safety Inspector

This course meets the 72-hour training required by the Division of EMS and meets objectives listed in the NFPA standard 1031 for Fire Inspector.

Each student is required to be a certified firefighter under section 4765.55 of the ORC (or one of the following listed below):

Office of the State Fire Marshall

A firefighting agency defined by division (A)(3) of section 9.60 of the ORC

A private fire company defined by division (A)(5) of section 9.60 of the ORC in accordance with division (B), (C), or (D) of the same section.

If any such student is NOT one of the above listed, it is our school policy to allow them to partake in the training session, but they WILL NOT be able to take the state certification. They will instead receive a certificate of attendance only.

It ends within the consecutive 12-month period.

It issues a document of course completion to each student who successfully completes the training program.

It requires trainees to provide written documentation of successful completion of the following required pre-courses before allowing the trainee to obtain state certification:

National Incident Management System course IS-700

Incident Command System course IS-100

Fire/FSI Instructor Online Education Policy

The training charter DOES NOT conduct online/distance education courses in accordance with O.A.C 4765-11-18.

There will be no admissions for online training.

Examination Practices/Policies

The training charter shall meet all requirements for the administration of the practical skills examinations and written examinations in accordance with O.A.C 4765-11-19 and 4765-11-20 to include:

The training charter WILL ensure the integrity and security of all practical and written examinations by keeping these examinations private and secured until the moment of testing. All examination materials will be controlled by the instructors so as to keep it secure. Students will not be allowed access to any copy of any examination.

The training charter will have a current signed Written Testing Agreement with the Executive Director on file with the Division of EMS.

The training charter uses a designated, experienced and trained proctor to administer the computer-based State exams. He is not affiliated with the training charter, and is employed by the school district for proctoring services only. He has attended multiple online training sessions regarding the new rollout of the computer-based testing system and has successfully administered many tests prior to the rollout, and several afterwards. He is familiar with the process of registering, securing, and accessing the examination system.

The program director, or the designated proctor, will AT ALL TIMES be present in the examination room for the duration of testing.

NO firefighter, or instructor shall proctor or be present in the testing room during examinations, unless they are sitting for one as part of a course requirement.

PRIOR to admittance into the testing room, electronic devices, including, but not limited to: laptops, cell phones, flash drives, tablets and other like devices must be stored outside. Test-takers will not be allowed into the testing room with these devices during the examination process.

ONLY those students whom have passed all requirements to sit for the State examination will be eligible to test. The proctor will receive a list of students that are eligible prior to the scheduled test date and will select them for testing eligibility on the Division of EMS online system. Only those approved students will be administered the examination.

The training charter requires ALL test-takers to furnish a picture ID as proof of person.

The program director and assigned practical skills evaluator instructors will assume the responsibility of the administration and setup of the practical examinations.

The practical skill stations will be set up PRIOR to test time.

ONLY the program director and assigned practical skills evaluator instructors will conduct evaluations during practical skills examinations.

ONLY certified and trained instructors shall be selected to be the practical skills evaluator eligible to conduct the practical skills examinations.

The course's lead instructor SHALL NOT be permitted to be that courses practical skills evaluator and will not evaluate the students practical skills.

The training charter WILL ensure that all students be provided, even if on a borrowed and temporary basis, equipment, supplies, and apparatus that meet NFPA 1001 Standard for Fire Fighter Qualifications performance objectives

The training charter WILL ensure that the student candidates undergoing practical skills examination shall not be permitted to directly observe other student candidates undergoing their practical skills examination.

The training charter WILL ensure any potential compromise of the practical or written examination process be reported immediately to the Executive Director and/or his office.

Evaluations:

During the program, students are involved in a variety of evaluations:

1. Course evaluations
2. Instructor effectiveness
3. Facilities appropriateness
4. Overall program evaluation

END OF HANDBOOK



Scioto County Career Technical Center Post-Secondary Education



Medical Evaluation Form

Name _____		Date of Birth _____	
Address _____		Sex	M F
Emergency Contact: Name _____		Phone _____	Relationship _____
The student has met the requirements of this medical evaluation: YES NO			

The Ohio Department of Public Safety requires Firefighter students to meet the medical requirements of National Fire Protection Association (NFPA) 1582: Standard on Comprehensive Occupational Medical Program for Fire Departments, Chapter 6.

6.1: A medical evaluation of a candidate shall be conducted prior to the candidate being placed in a training program or fire department emergency response activities.

6.2.2: Candidates with Category A medical conditions shall not be certified as meeting the medical requirements of this standard.

If a candidate answers Yes to any of the following medical conditions, they will not be permitted to attend firefighter training.

6.3 Head and Neck	Yes	No	6.8 Lungs and Chest Wall	Yes	No
Do you have any defect of the skull preventing helmet use or leaving underlying brain unprotected from trauma?			Do you have any of the following conditions?		
Do you have any skull or facial deformity that would not allow for successful fit of a respirator?			Asthma – reactive airway disease requiring bronchodilator or corticosteroid therapy for two or more consecutive months in the previous two years, unless the candidate can meet the requirement in 6.8.1.1 (available upon request)		
6.4 Eyes and Vision	Yes	No	6.9 Aerobic Capacity	Yes	No
Is your visual acuity less than 20/40 binocular corrected, or less than 20/100 binocular uncorrected?			Do you have an aerobic capacity less than 12 metabolic equivalents (METs) (1 MET = 42 mL O ₂ /kg/min)?		
Do you have monochromatic vision?			6.10.1 Heart	Yes	No
Do you have monocular vision?			Do you have any of the following conditions?		
6.5 Ears and Hearing	Yes	No	Coronary heart disease		
Do you have chronic vertigo or impaired balance?			Cardiomyopathy or congestive heart failure		
Do you have hearing loss in the unaided better ear greater than 40 decibels (dB) at 500 Hz, 2000 Hz, and 3000 Hz when the audiometric device is calibrated to ANSI Z24.5?			Acute pericarditis, endocarditis, or myocarditis		
Do you require a hearing aid or cochlear implant?			Recurrent syncope		
			Third-degree atrioventricular block		
			Cardiac pacemaker		
			Hypertrophic cardiomyopathy		
6.6 Dental	Yes	No	Heart transplant		
Do you have any dental conditions that would inhibit the use of a respirator?			A medical condition requiring an automatic implantable cardiac defibrillator		
Do you have any dental conditions that would inhibit your ability to communicate effectively?			6.10.2 Vascular System	Yes	No
			Do you have any of the following conditions?		
6.7 Nose, Oropharynx, Trachea, Esophagus, and Larynx	Yes	No	Hypertension		
Do you have a tracheostomy?			Thoracic or abdominal aortic aneurysm		
Do you have aphonia?			Carotid artery stenosis or obstruction resulting in greater than or equal to 50% reduction in blood flow.		
Do you have any nasal, oropharyngeal, tracheal, esophageal, or laryngeal conditions that would inhibit the use of a respirator?			Peripheral vascular disease		
6.8 Lungs and Chest Wall	Yes	No	6.11 Abdominal Organs and Gastrointestinal System		
Do you have any of the following conditions?			Presence of uncorrected inguinal/femoral hernia?		
Active hemoptysis			6.12 Metabolic Syndrome		
Current empyema			Do you have metabolic syndrome with aerobic capacity less than 12 METs?		
Pulmonary hypertension					
Active tuberculosis					
Obstructive lung disease					
Lung transplant					
Hypoxemia – Exercise testing is indicated when resting oxygen is less than 94% - Exercise desaturation shall not be less than 90%					

6.13 Reproductive System	Yes	No	6.17 Neurological Disorders	Yes	No
Are you pregnant? (Heavy physical exertion has been associated with spontaneous abortions. Lifting heavy object should be avoided during pregnancy. Excessive heat, toxic chemicals, and catecholamine surges have the potential for fetal harm. A "Yes" answer does not indicate non-compliance. Further documentation concerning pregnancy and NFPA 1582 is available upon request.			Do you have any of the following?		
			Myasthenia gravis with activity or evidence of progression within the previous three years		
			Progressive muscular dystrophy or atrophy		
			Uncorrected cerebral aneurysm		
			Any single unprovoked seizures and epileptic conditions, including simple partial, complex partial, generalized, and psychomotor seizure disorders (see addendum for exceptions)		
6.14 Urinary System	Yes	No	Dementia (Alzheimer's and other neurodegenerative diseases) with symptomatic loss of function or cognitive impairment		
Do you have renal failure or insufficiency requiring continuous ambulatory peritoneal dialysis (CAPD) or hemodialysis?			Parkinson's disease and other movement disorders resulting in uncontrolled movements, bradykinesia, or cognitive impairment		
6.15 Spine and Axial Skeleton	Yes	No	6.18 Skin	Yes	No
Do you have any of the following?			Do you have any of the following?		
Scoliosis of thoracic or lumbar spine with angle greater than or equal to 40 degrees.			Metastatic or locally extensive basal or squamous cell carcinoma or melanoma		
History of spinal surgery with rods still in place.			Any dermatological condition that would not allow for a successful fit test for a respirator		
Any spinal or skeletal condition producing sensory or motor deficit or pain due to radiculopathy or nerve root compression			6.19 Blood and Blood-Forming Organs	Yes	No
Any spinal or skeletal condition causing pain that frequently or recurrently requires narcotic analgesic medication			Do you have any of the following?		
Cervical vertebral fractures with multiple vertebral body compression greater than 25%			Hemorrhagic stress requiring replacement therapy		
Thoracic vertebral fractures with vertebral compression greater than 50%			Sickle cell disease (homozygous)		
Lumbosacral vertebral fractures with vertebral body compression greater than 50%			Clotting disorders		
6.16 Extremities	Yes	No	6.20 Endocrine and Metabolic Disorders	Yes	No
Do you have any of the following?			Do you have any of the following?		
Joint replacement (see addendum for exceptions)			Type 1 diabetes mellitus (exceptions available upon request)		
Amputation or congenital absence of upper extremity			Insulin requiring Type 2 diabetes mellitus (exceptions available upon request)		
Amputation of either thumb proximal to the mid-proximal phalanx			6.22 Tumors and Malignant Diseases	Yes	No
Amputation or congenital absence of the lower extremity (see addendum for exceptions)			Do you have any of the following?		
Chronic non-healing or recent bone grafts			Malignant disease that is newly diagnosed, untreated, or currently being treated, or under active surveillance due to the increased risk of reoccurrence		
History of more than one dislocation of shoulder without surgical repair or with history of recurrent shoulder disorders within the last five years with pain or loss of motion, and with or without radiographic deviations from normal.					
6.17 Neurological Disorders	Yes	No			
Do you have any of the following?					
Ataxias of heredo-degenerative type					
Cerebral arteriosclerosis as evidenced by a history of transient ischemic attack, reversible ischemic neurological deficit, or ischemic stroke					
Hemiparalysis or paralysis of a limb					
Multiple sclerosis with activity or evidence of progression within the previous three years					

6.24 Chemicals, Drugs, and Medications	Yes	No	Student Name
Do you require chronic or frequent treatment with any of the following medications?			Medical Office Name
Narcotics, including methadone			Medical Office Phone Number
Sedative-hypnotics			Medical Office Contact Person
Full-dose or low-dose anticoagulation medications or any drugs that prolong prothrombin time (PT), partial thromboplastin time (PTT), or international normalized ration (INR)			This is to certify that he above named student had a physical exam on _____ (date) and is in apparent good health, has no condition that would endanger the health and well-being of students or staff, has met the requirements of this form, and is physically/mentally able to participate in the firefighter program.
Respiratory medications; inhaled bronchodilators, inhaled corticosteroids, systemic corticosteroids, theophylline, and leukotriene receptor antagonists			
High-dose corticosteroids for chronic disease			
Anabolic steroids			
Evidence of illegal drug use detected through testing, conducted in accordance with Substance Abuse and Mental Health Services Administration (SAMHSA)			Primary Care Provider Printed Name/Credentials
Evidence of clinical intoxication or a measured blood level that exceeds the legal definition of intoxication			Primary Care Provider Signature



Firefighter Waiver

Scioto County Career Technical Center, #126
Chartered School Name

951 Vern Riffe Drive, Lucasville, OH 45648
Address

WHEREAS, the undersigned voluntarily desires to participate in the _____
Firefighters Training Course; and (DATE)

WHEREAS, the undersigned is aware that there are risks and hazards which may arise through participation in said activity and that participation in said activity has serious risks, including risk of loss of life and/or limb and/or property of the undersigned; and

WHEREAS, the undersigned being knowledgeable that risks are involved in said Course and being willing to waive all rights or claims to injury, person, and/or property;

THEREFORE, it is agreed as follows:

In consideration of being allowed to participate in said activity and receive educational and other benefits there from the undersigned hereby voluntarily assumes all risks of accident or personal damage to his person or property, and hereby releases Scioto County Career Technical Center, Charter School #126 its agents and employees, from every claim, liability or demand of any kind sustained, whether caused by negligence of the said Scioto County Career Technical Center, Charter School #126. , its agents or employees, or otherwise. This release shall be binding upon any heirs, administrators, executors and assigns of the undersigned.

The undersigned, by signing this release, hereby certifies that the undersigned has read and fully understands the conditions herein provided.

Department Chief Signature

Student Signature

Department Name

Social Security Number

Date

Date



Firefighter Letter of Intent

TO: SCIOTO COUNTY CAREER TECHNICAL CENTER
POST-SECONDARY EDUCATION CENTER
740.259.5526

FROM: FIRE DEPARTMENT _____
DEPT. CHIEF _____
BILLING ADDRESS _____

PHONE NO. _____

This letter is to inform you of our intent to pay for the cost of the Firefighter training course being offered at **Scioto County Career Technical Center, Charter School #126.**

Below is a list of our personnel participating in the training course:

<u>STUDENT NAMES</u>	<u>COST OF CLASS</u>	<u>BOOKS</u>	<u>TOTAL</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Sincerely yours,

Department Chief Signature

Date

Department Name



Volunteer Firefighter Course Objective

THIRTY-SIX (36) HOUR CERTIFIED TRAINING COURSE FOR VOLUNTEER FIREFIGHTERS
STATE OF OHIO - FIRE INSTRUCTOR'S DISCLAIMER

After successful completion of the thirty-six hour Ohio Volunteer Firefighter Course, students will be certified as a Volunteer Firefighter as recognized in the Ohio Revised Code. The certification will be renewed after three years, provided the Firefighter successfully completes the continuing education requirements. Recognizing that the State of Ohio Certified Volunteer Firefighter Course does not meet the minimum requirements recognized by the National Fire Protection Association (NFPA) standards as a qualifying level of public safety responder for trained Firefighters, the Volunteer Firefighter certification is a stand-alone certificate for the State of Ohio. The Volunteer Firefighting course provides the basic elements upon which Firefighters can begin to build their training portfolio and assist in the firefighting operations with their Fire Departments.

The Volunteer Firefighter Course limits hazardous exposures due to safety concerns as described in the Ohio Administrative Code. Therefore, the Volunteer Firefighter Course does not allow Certified Instructors to teach students in the type of hazardous environments to which their Fire Departments will be exposed. These activities include but are not limited to 'Immediately Dangerous to Life and Health' (IDLH), and apparatus operation, the training for which is not provided in the Volunteer Firefighter Course. These limitations being such as they are, the Fire Chief, or the authority having jurisdiction, must provide for training in these expanded areas if the Firefighter is expected to function safely in these environments. The Fire Chief acknowledges that he or she shall assume all the risk and liability for deviating from any of the state and/or nationally recognized standards for firefighting.

The Division of Emergency Medical Services (EMS) and the Ohio Society of Fire Service Instructors (OSFSI) recommend that all Certified State of Ohio Volunteer Firefighters should continue to attain the NFPA Level 1 Firefighter qualifications.

Student Name - Printed

Student Signature

Date

Department Chief Signature

Date

Department Name

EMS & Firefighting Disability/Reasonable Accommodations

Student Waiver

PLEASE READ CAREFULLY

Request an ADA Accommodation for Written and/or Practical Examination

American's with Disabilities Act of 1990 (ADA) allows for reasonable and appropriate accommodations in accordance with the Americans with Disabilities Act for individuals with documented disability who demonstrate a need for accommodation.

The purpose of test accommodations is to provide students with full access to the test. However, test accommodations are not a guarantee of improved performance or test completion. The Division of EMS provides reasonable and appropriate test accommodations to individuals with documented disabilities who demonstrate a need for test accommodations.

Test accommodations are individualized and considered on a case-by-case basis. Consequently, no single type of test accommodation (e.g. extra time) would necessarily be appropriate for all individuals with disabilities. Simply demonstrating that an individual meets diagnostic criteria for a particular disorder does not mean that the person is automatically entitled to test accommodations.

Specific test accommodations should be related to the functional limitations. It is essential that the documentation of the disability provide a clear explanation of the current functional limitation(s) and a rationale for each requested test accommodation. A student should work with program directors and instructors who know them to determine which test accommodations are appropriate.

All students who are requesting test accommodations because of a disability must provide appropriate documentation of their condition and how it is expected to affect their ability to take the test under standard conditions. This shall include but not be limited to the following:

- Individual Education Plan (IEP) dated in the last five (5) years;
- Documentation from a medical or other qualified professional who diagnosed the condition;
- A detailed letter from a certified vocational evaluator who has evaluated the student.

The documentation submitted must contain the following:

- The nature and extent of disability;
- Proposed accommodation;
- Rationale behind the proposed accommodations; and
- Type of accommodations made to the student during training.

The Program Director of the chartered training program is responsible to submit a signed letter with the documentation with the following details.

1. Describe the type of accommodations granted to the student while in the fire training program.
2. Attach the documentation that includes a detailed justification for the proposed accommodation.
3. Identify the individual that will be administering the examination. Include their position and experience with administering examinations to those with disabilities granted by the Division of EMS. Such representative shall be approved by the Division of EMS prior to administering the examination. The chartered training program is responsible for ensuring the security of the examination and the integrity of the testing process.
4. Attach a signed statement by the student explaining the type of accommodations they are requesting. The statement must include the following:
 - a. The student legal name;
 - b. Current address;
 - c. Student preference for method of testing (computer or paper).
5. In the event of a paper-and-pencil written examination is requested as an accommodation, the chartered fire training program test security policies shall be included with the submitted documentation.

To ensure adequate time to evaluate ADA requests, the accommodation(s) request and all required documentation should be forwarded to the Division of EMS at least thirty (30) days prior to the examination date request.

The student is responsible for arranging and bearing the cost for appropriate evaluation.

The determination and provision of reasonable accommodations involves a process of discussion and negotiation between the student and the Division of EMS. With the goal of maximizing the independence of the adult learner, the Division of EMS will make a good-faith effort to provide effective accommodations to students with disabilities. The final determination as to whether to allow an accommodation and the type of accommodation that will be allowed rests with the Division of EMS.

Accommodations are determined on a case-by-case basis depending on the identified needs of the student and analysis of supporting documentation and available resources. Ohio Department of Public Safety employees may be consulted as to whether an accommodation is reasonable given program requirements and structure. The Division of EMS is not compelled to make accommodations which would fundamentally alter the nature of the training or compromise the certification process.

**CHECKLIST FOR ADA ACCOMMODATIONS AND REQUEST FOR WRITTEN EXAMINATION
ACCOMMODATIONS**

Please complete this form in its entirety and attach required documentation to this form prior to submission. Incomplete submissions will be returned.

Student Information:

Student Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone number: _____

Email Address: _____

Examination Information:

Accommodation is requested for the following examination: _____ (Course Level) to

be administered on _____, _____ (Date and Time) at: _____ (Test Location)

Course / Examination ID#: _____ by _____ (Name of Charter)

Student Letter requesting accommodation

Student Verification of requested accommodations (please mark all that apply and justify each request in attached letter):

_____ Separate Testing Area _____ Reader as accommodation for learning disability
_____ Extended Time _____ Other: (please specify): _____

Program Director Letter (Please attach)

Program Director Verification of requested accommodations

The applicant has discussed with me the nature of the disability. It is my opinion that because of this applicant's disability:

he/she should receive the requested accommodations.

he/she should not receive the requested accommodations. (Please include Justification):

Please Mark All That Apply:

_____ Separate Testing Area _____ Reader as accommodation for learning disability
_____ Extended Time _____ Other: (please specify): _____

Documentation dated within last 5 years (if older than 5 years, include justification as to why it should be reviewed)

_____ IEP (must be dated in the last 5 years) _____ Medical or other qualified professional
_____ Certified Vocational Evaluator

Documentation of compliance with NFPA 1582, Chapter 5, indicating the candidate's ability to perform the essential job task as a member of the fire department.



Scioto County Career Technical Center
Post-Secondary Education

For Office Use Only

Application for Admission
Fire Training Program

**All questions must be answered. If not applicable, answer N/A.

First Name Last Name MI Maiden Name

Date of Birth: _____ Social Security Number: _____

Age: _____
Disclosure of SSN is mandatory pursuant to R.C. 3123.50 in furtherance of licensing provisions and any other state or federal requirements.

Home Phone Cell Phone

E-Mail Address County of Residence

Street Address City State Zip

Please indicate the course that you are applying for:

- Volunteer
- FF1 Transitions
- Firefighter I
- Firefighter II
- Firefighter I & II
- Fire Safety Inspector

High School Attended: _____ Year of Graduation: _____

High School Location: _____
City State

If you didn't graduate from High School, year that you earned your GED: _____

Start Date of Course: _____ End Date of Course: _____

Fire Training Program Lead Instructor: _____

Certification Number of Lead Instructor: _____

Fire Training Program: **Scioto County Career Technical Center**
Fire Training Program Address: **951 Vern Riffe Drive, Lucasville, OH 45648**
Fire Training Program Phone #: **Phone: 740.259.5526 – Fax: 740.259.8312**

You must answer the following question: Are you under 18 years of age? YES NO

If yes, are you 17 years of age and currently enrolled in your twelfth or final year of high school?
 YES NO



ACKNOWLEDGEMENT OF RECEIPT

- 1. I HEARBY STATE THAT I HAVE READ, UNDERSTAND, AND WILL COMPLY WITH THE FIRE TRAINING CHARTER #126 CLASS GUIDELINES**
- 2. I agree that I was given the Health & Safety Plan and the Sexual and Gender-Based Harassment and Other Forms of Interpersonal Violence Policy; and know that the Operation, Maintenance & Improvement Plan and the annual Safety & Security Report are available in the post-secondary office for review.**
- 3. I, the undersigned, understand that my enrollment is voluntary and that I shall not hold the Board of Education or school officials responsible for injury resulting from my actions or conduct.**

Student Name (Printed) _____ Date _____

Student Signature _____

Parent/Legal Guardian Name _____ Date _____

Parent/Legal Guardian Signature _____



Scioto County Career Technical Center
Post-Secondary Education

Firefighter Release

The Scioto County Career Technical Center, Post-Secondary Education in making available its or other selected facilities, training grounds, equipment, and its staff, to provide an opportunity to learn on the part of its students and other invitees, makes no representation of and assumes no liability for the suitability or condition of its or other selected facilities, training grounds, or equipment.

The training facility assumes no liability for and shall be indemnified and held harmless for any claims, demands or suits of any nature, kind or description whatsoever, including costs and expenses, for or on account of any loss or damage to property owned or possessed by any student or other invitee or any injury to such person which may result from any cause, including but not limited to, the condition and operation of training facility facilities, training grounds, and equipment, or the condition and operation of any other selected facilities, training grounds and equipment, and the acts or omissions of members of its staff.

The members of the training facility staff and the instructors who are independent contractors with the state, in their personal and representative capacity, assume no liability for and shall be indemnified and held harmless from suit of any nature, kind, or description whatsoever, including costs and expenses for or on account of any loss or damage to property owned or possessed by any student or other invitee or any injury to such person which may result from any cause whatsoever.

Student or invitee hereby authorizes the training facility to seek emergency medical assistance on his/her behalf, as necessary, and agrees to pay for any and all medical expenses incurred on his/her behalf. Student or invitee shall indemnify and hold harmless the training facility for any and all such emergency medical expenses.

Student or Invitee (Signature)

Date

.....
TO BE COMPLETED BY STUDENT OR INVITEE (PLEASE PRINT)

Representing: _____

Name: _____ Social Security #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____



Scioto County Career Technical Center
Post-Secondary Education

DECLARATION OF CRIMINAL HISTORY INFORMATION

If you have been convicted, pled guilty to, had a judicial finding of guilt for, or had a judicial finding of eligibility for treatment and/or intervention in lieu of conviction for any felony, a misdemeanor committed in the course of practice, misdemeanor involving moral turpitude, a violation of any federal, state county, or municipal narcotics or controlled substance law you will have to complete a declaration of criminal history form to accompany your initial state application. Please note that the State of Ohio EMS board may reject you initial certification application.

By signing below I indicate that I understand that there are certain criminal convictions that may preclude the obtaining of a State of Ohio EMS certification.

If you have any questions regarding this please contact the Program Director at 740-259-5526.

Applicant Name _____

Applicant Signature _____

Date _____

I attest that the above information is true and correct to the best of my knowledge. I hereby give permission to the Fire Training Program to verify any of the above information.

Applicant Signature

Date

IF YOU ARE UNDER 18 YEARS OF AGE, YOU MUST HAVE YOUR PARENT OR LEGAL GUARDIAN SIGN THIS FORM BEFORE IT CAN BE ACCEPTED.

Parents Signature (if applicable)

Date

I attest that I have reviewed the above information and verified any prerequisite training required of this individual. I also attest that the above individual, having met the admission requirements in Ohio Administrative Code 4765-11-03, is admitted to the fire training program as indicated above as of _____.

Program Coordinator Signature

Date

Program Coordinator – Print Name



Scioto County Career Technical Center Post-Secondary Education

Student Enrollment Data

Student Name: _____ Program: _____ Date: _____

Please complete the following information. This confidential survey information is used for State reporting purposes only:

Gender:

- Male
- Female

Ethnicity:

- | | | |
|---|-----------------------------------|---|
| <input type="checkbox"/> African American (Black) | <input type="checkbox"/> Asian | <input type="checkbox"/> Native American |
| <input type="checkbox"/> Caucasian (White) | <input type="checkbox"/> Hispanic | <input type="checkbox"/> Pacific Islander |
| <input type="checkbox"/> Multi-Race | <input type="checkbox"/> Latino | |

Please check any that may apply:

- Disabled** - A person who has a physical or mental impairment that substantially limits one or more major life activities. *If checked above, please contact the Post-Secondary office to schedule an appointment with the Program Coordinator to discuss any possible accommodations for program assistance.*
 - Deaf or Hearing Impaired
 - Developmentally Handicapped
 - IEP
 - Learning Disability
 - Limited English Proficiency
 - Orthopedically (or Other)
 - Seriously Emotionally Disabled
 - Speech or Visually Impaired

- Economically Disadvantaged** - Individuals from economically disadvantaged families, including foster children, Pell grant or other financial assistance recipients, or migrants.

Check the following that qualifies you as economically disadvantaged:

- Qualifies for Pell grant
- Qualifies for agency funding assistance
- Family income is at or below national poverty level
- Participant, participant's parent(s), or participant's guardian is (are) a recipient of public assistance

- Single Parent** - a parent who (1) is unmarried (i.e., divorced, widowed, or never married) or separated from a spouse and (2) has a minor child or children for which the parent has either custody or joint custody

- Displace Homemaker** - A homemaker for at least 5 years, unemployed or under-employed who: (1) has been dependent on the income of a relative but is no longer supported by such income, or (2) because of divorce, separation or the death or disability of a spouse must prepare for paid employment, or (3) has been receiving public assistance.

.....
The above information is true and accurate to the best of my knowledge.

Signature: _____ Date: _____

The Scioto County Career Technical Center is an equal opportunity educational institution. Our programs are open to all adults regardless of race, creed, religion, national origin, gender or disability. Buildings and facilities are handicap accessible.



University System of Ohio
Board of Regents

Release of Information Form

I, (print name) _____, authorize the Ohio Board of Regents to release my educational records, which includes my name, social security number, student ID number, address, job placement records and job retention records to the agency listed below. The agency use of these records is limited to and in connection with the audit and evaluation of Federally-supported education programs, or in connection with the enforcement of the Federal legal requirements, which relate to such programs.

Student/Examinee information released to:

Ohio Department of Job and Family Services
145 South Front Street
Columbus, Ohio 43215

Ohio Board of Regents
25 South Front Street
Columbus, Ohio 43215

My signature is my acknowledgement that I have read and voluntarily consented to the release of the above-mentioned education records as collected and utilized by the Ohio Technical Center (OTC) program I have previously enrolled or tested with.

Social Security Number or Security Number * - -

* Use of Social Security Number is optional. If you choose to give us your Social Security Number, we will use it to maintain your file and assure prompt and accurate reporting.

(Revised 09-23-2013)



Scioto County Career Technical Center
Post-Secondary Workforce Education

I authorize the Scioto County Career Technical Center, Post-Secondary Education, to obtain and exchange any information about myself as required from past and future employers, training facilities, and other organizations for the purpose of determining eligibility, suitability, and providing services. This also includes obtaining any income verification from employers, public assistance agencies, and/or any other social service agency.

Privacy Policy: Directory information (i.e. name, photograph, major field of study, participation in officially-recognized activities, date of attendance and graduation, certificates awarded, and awards received) may be released without further consent. If you do not want SCCTC to release your directory information, please send a letter to: Director of Post-Secondary Education, 951 Vern Riffe Drive, Lucasville, OH 45648.

I have read and agree to all of the above:

Signature of Student/Examinee

Date