

PEMA Instructor Application Form

Course(s) for which I am applying to become a Certified Instructor

Course:		Course:	
Course:		Course:	
Course:		Course:	
Course:		Course:	

I acknowledge and agree to the following:

Upon selection as a PEMA Instructor, I agree to have my name posted on the PEMA training website as an instructor for the courses for which I am approved to instruct. I also understand the phone number and email address provided will be distributed to other agencies in and outside of Pennsylvania seeking qualified instructors.

Instructor evaluations are part of every course; these evaluations may include student, peer or other evaluation methods selected by PEMA. PEMA reserves the right to remove instructors at any time for due cause as the discretion of the Pennsylvania State Training Officer.

By signing this form, I hereby certify that I meet the criteria described in this policy and will adhere to the listed guidelines of the PEMA Instructor Policy.

IMPORTANT – Please initial that you have included the following required forms and information:

	PEMA Instructor Application Form		Req'd training certificates & background checks
	Resume and description qualifications for the classes you are seeking approval to instruct		Adult education methodology course or examples of formal instructor training or experience in instructing adult learners
	One reference and normal business hours phone contact		PEMA Instructor Code of Conduct

Applicant Printed Name: _____ Date: ____ / ____ /20 ____

Applicant Signature: _____ Phone: (____) _____

Email: _____ @ _____ County: _____

Address: _____

Please submit this form and all support materials, including certificates, via hard copy to the below

address, or email to ra-emtraining@pa.gov.

Pennsylvania Emergency Management Agency
 Attn.: Training and Exercise Division
 1310 Elmerton Avenue
 Harrisburg, PA 17110



Last Name First Name Middle Name FEMA SID

Preferred Mailing Address: (Check One) _____ Home _____ Business

County of Residence: _____

Home Address: _____
(Number, Street, City, State, Zip)

Business Address: _____
(Number, Street, City, State, Zip)

Contacts:

Home: (____) _____ Business: (____) _____ Email: _____

____/____/____ ft. in. ____ Lbs. U.S. Citizen: ___ Yes ___ No
Date of Birth Height Weight

Many courses taught in the emergency services program requires the Instructor to perform competencies for demonstration purposes and/or for the safety of the student. Is there any reason why you could not perform the duties of the position or the competencies of any course assigned to you to instruct?

_____ Yes _____ No If "Yes", what is the reason? _____

Instructor Level: Agency _____ PEMA _____

Course(s) requesting to instruct: _____

OFFICE USE ONLY

General Requirements Met: _____ Yes _____ No Criminal Record Check: _____ Yes _____ No

Interview Date: ____/____/____

Agency

_____ Agency Request
_____ TTT/Specialty Requirements Met
_____ TTT

PEMA

_____ PEMA Accreditation

Courses assigned: _____

IRC Approval: _____ YES _____ NO Date: ____/____/____ By Whom: _____

GENERAL REQUIREMENTS: (Attach Documentation)

Age: _____ Years of Experience: (Min. 5) _____

Adult Education Methodology: _____ Yes _____ No

Have you ever been convicted of a Crime – Misdemeanor 2 or higher? _____ Yes _____ No

Please provide one (1) reference that can attest to your capabilities. Reference must be a current PEMA Instructor.

1 _____
(Name, Address, Position, Home Telephone)

EDUCATION:

Are you a High School Graduate? _____ Yes _____ No _____ G.E.D. _____ Year

School Name: _____

Post High School Education

College/Technical School Name	Location City/State	Curriculum	Degree	Date

EMPLOYMENT RECORD:

Current Employer

_____ Company Name _____ Address _____ Supervisor _____

_____ Job Title _____ Job Responsibilities _____ Date Started _____

Immediate Past Employer

_____ Company Name _____ Address _____ Supervisor _____

_____ Job Title _____ Job Responsibilities _____ Date Started _____

EMERGENCY MANAGEMENT EXPERIENCE:

List each emergency service organization in which you are currently active.

Dept. Name	Location	Date Joined	Paid	Vol.	Paid Call	Rank

List offices and/or positions that you have held. (Include dates/terms held)

Have you ever been expelled from an emergency service organization membership?

Yes No

Have you ever been suspended from an emergency service organization membership?

Yes No

If "Yes" for either question, please give the reason(s) for the action and the term of expulsion or suspension.

Have you ever been an emergency management instructor before applying to PEMA?

Yes No If "Yes", where were you an instructor and what were your reasons for leaving?

Applicant Signature _____ **Date:** _____

DOCUMENTATION TO BE ATTACHED

Attach copies of the following required documentation in order.

General:

1. ___ Divers License
2. ___ One sealed Letter of Reference
3. ___ Proof of Education (H.S. Diploma, GED, or Greater)
4. ___ Criminal Record Check Act 34
5. ___ Child Abuse Clearance Act 151
6. ___ Training Resume

Education Methodology: You only need to submit one of the following acceptable Educational Methodology training requirements:
Documented successful completion of any one of the following courses:

- PA State Fire Academy Course Educational Methodology for Local Level Instructors (EMLL)
- PA Department of Conservation and Natural Resources Instructor Trainer Course (30 hours – Sir Stanford Fleming College)
- National Fire Academy Resident Course R-114 Fire Service Course Design or its predecessor Fire Service Instruction Methodology
- A formal post-secondary collegiate level course in adult education methodology awarding at least 1 college credit
- A formal course of instruction in adult educational methodology and instructing adults of at least 30 hours duration conducted by another state's fire training system, the military services, state or federal agency, or other organization (i.e., PSP Instructor Development, DOC TST, Municipal Police Officers' Education and Training Commission (MOPETC) – General Instructor, WMD Instructor Training – COBRA)
- Certification (not challenge examination) as a Fire Instructor II by an entity accredited by the National Board on Fire Service Professional Qualifications (NBFSPQ) or the International Fire Service Accreditation Congress (IFSAC)
- Certification as a public-school teacher by the Pennsylvania Department of Education: secondary or post-secondary certification preferred;
OR Certification as an EMT Instructor by the Pennsylvania Department of Health.

1. ___ Adult Education Methodology Course (35 hours or 1 semester hour minimum)

OR

2. ___ Pennsylvania Department of Education Teaching Certificate

OR

3. ___ Instructor Credentials from another Agency (Dept. of Health, Dept. of Environmental Protection, Dept. of Conservation and Natural Resources, PA State Police, Dept. of Corrections, MOPTEC, WMD)

Specific Instructor Levels

Agency:

2. ___ Agency Request Letter

PEMA

9. ___ PEMA Accreditation